

SOUTHERN STATES UNIVERSITY

LAS VEGAS

CAMPUS

ENROLLMENT AGREEMENT

FOR

GRADUATE **C**ERTIFICATE IN INFORMATION TECHNOLOGY PROGRAM

ADMINISTRATIVE OFFICES

San Diego – Main Campus 1094 Cudahy Place Suite 120 San Diego, CA 92110 Phone: (619) 298-1829 - Fax: (619) 704-0175 Las Vegas 2000 South Jones Boulevard Suite 120 Las Vegas, NV 89146 Phone: (702) 786-3788 - Fax: (619) 704-1002

www.ssu.edu - info@ssu.edu

OVERVIEW

Southern States University (SSU) is an accredited American University, providing quality education since its inception in Southern California in 1983. **SSU** provides quality instruction, while offering excellent prices, which is evident when comparing **SSU** to other U.S. universities.

MISSION STATEMENT

Southern States University empowers a diverse community of students to expand their career opportunities with acquired skills and knowledge, lead fulfilling internal and external lives, and become contributing, edifying members of global communities. Our student-centric approach to education is formulated based on collaborative learning that focuses on promoting critical thinking skills. We expand access to education by creating high-quality, affordable, and innovative pathways that meet the unique needs of each student. Our success is defined by our learners' success.

VISION STATEMENT

The University will bring together a diverse community of students to study in a modern collaborative learning environment to promote critical thinking, ethical academic and business behavior, information literacy, technological proficiency, communication skills, and intercultural engagement with a global perspective. Within a 5-year time horizon (by 2026), SSU will achieve full institutional accreditation at the level of regional accreditation.

SSU is:

- Accredited by the Accrediting Council for Independent Colleges and Schools (ACICS).
- Granted "Eligibility" status by the WASC Senior College and University Commission (WSCUC).

SSU offers the following programs in Nevada:

- Master of Business Administration (MBA)
- Master of Science in Information Technology (MSIT)
- Graduate Certificate in Business Administration
- Graduate Certificate in Information Technology

SSU has several campuses, in California's most beautiful and glamorous cities, San Diego and Irvine, and one campus in Las Vegas, Nevada. These cities boast large student populations and are ideal places to live and study.

The Las Vegas campus is conveniently located just minutes from the world-famous Las Vegas Strip. A bus stop is easily accessible in front of the school to connect students with Las Vegas' main source of public transportation.

SSU ACADEMIC PROGRAM IN NEVADA

Program Information - GCIT

Duration: 3 quarters Total credits: 26 Price per credit: \$265.65x 26= \$6,906.90 General Library Fee: \$75.00 per quarter Processing Fee: \$40.00 per payment Account for Student Indemnification Fee: \$4.00 per new student enrollment (NV students only)

A normal academic course load for GCIT students consists of 8 credit hours per term/2 classes, which would result in tuition fee charges of \$2, 240.20 /term plus general library fees of \$75.00/term and a \$40.00 processing fee/payment on the Quarterly Payment Plan.

Total minimum quarterly payment for GCIT is \$2,240.20.

Current students are bound by the pricing and terms included in their Enrollment Agreement, which is consistent with the SSU Catalog in effect at the time of initial enrollment.

GRADUATE CERTIFICATE IN INFORMATION TECHNOLOGY PAYMENT OPTIONS

	Payment options	Number of payments	Estimated Total Tuition	Estimated Total Tuition and Fees	What is included
	Payment in Full ^#	1 per program	\$6,906.90	\$7,171.90	Tuition = 26 credits x \$265.65 = \$6,906.90 General Library Fee: 3 qtrs. x \$75.00= \$225.00 Processing Fee = \$40.00 Total = \$7.171.90
	Quarterly ^#	1 per quarter	\$6,906.90		Tuition = 26 credits x $$265.65 = $6,906.90$ General Library Fee = 3 qtrs. x $$75.00 = 225.00 Processing Fee = 3 qtrs. x $$40.00 = 120.00 Total = $$7,251.90$ <i>Ex: 8 credits + Fees = \$2,240.20/quarter</i>
٥	Installments ^#	3 per quarter	\$6,906.90	7,491.90	Tuition = 26 credits x \$265.65 = \$6,906.90 General Library Fee = 3 qtrs. x \$75.00 = \$225.00 Processing Fee = 3 qtrs. x 3 installments x \$40.00= \$360.00 Total = 7,491.90 <i>Ex: 8 credits + Fees</i> =\$773.40/installment

^ Any outstanding balance with SSU must be paid in full to Petition for Graduation.

^ General Library Fee =3 qtrs. x \$75.00= \$225.00 - to be paid at the beginning of each quarter

^^^ Processing Fee = 9 payments x \$40.00 = \$360.00

NOTE: All other fees must be paid at the time of service.e.

Note: Students wishing to change their GCIT program enrollment from on-site to online (or vice versa), must contact the Registrar to complete a new enrollment agreement. All Fees Schedule

SSU ACADEMIC PROGRAM IN NEVADA

Graduate Certificate in Information Technology (GCIT)

- 7 Courses
- 26 credits total

Southern States University's Graduate Certificate in Information Technology is a one-year program eligible for the OPT program that prepares students in the field of information technology. With its emphasis on providing a solid academic and theoretical foundation combined with modern IT skills, the program is structured to ensure its students acquire an in-depth understanding of the IT field, as well as the technical skills required to cope with the ever-increasing complexity of IT issues in the modern world. In consideration of students' tight schedules and responsibilities.

HEALTH INSURANCE

Health Insurance is mandatory for all F-1 Students. Medical care in the United States can be quite expensive. All fulltime students are required to show proof that s/he has medical insurance for issuing their I-20 form.

It is the student's responsibility to provide SSU with evidence of insurance by the start date of their program.

For information purposes, here are three possible sources for insurance. Their inclusion here is not meant as a recommendation, and students may select any insurer they choose.

IMG Global - https://www.imglobal.com/international-student-health-insurance

Blue Shield of California - www.blueshieldca.com

EHealthInsurance - www.ehealthinsurance.com

ISO International Student Health Insurance - www.isoa.org

APPLICATION FOR ADMISSION – LAS VEGAS

Student Information

	First Name	Middle	Male / Female
Date of Birth (MM/DD/YY) Country of		of Birth Email A	ddress (required)
I-94 Number	Passport Number	Expiration Date	Visa Expiration Date
SEVIS Number			
Student's Permanen	t Address in his/her nati	ve country	
Street	City	State/Province	Zip
Country		Telephone number	
Student's Permanen	t Address in the US		
Street	City	State/Province	Zip
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Telephone number (the US Graduate Certificate in		Social Security Number (if yogen and a social Security Number (if yogen and a social Security	
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Graduate Certificate in How did you hear ab Student Educational	Information Technology (Cooperation Southern States Uni	GCIT) – 1 year program 26 Credit	Hours
Graduate Certificate in How did you hear at Student Educational <u>High School:</u>	n Information Technology (C bout Southern States Uni I History:	GCIT) – 1 year program 26 Credit	Hours
Graduate Certificate in How did you hear at Student Educational <u>High School:</u> School name:	n Information Technology (C bout Southern States Uni I History:	GCIT) – 1 year program 26 Credit	Hours
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Graduate Certificate in How did you hear at Student Educational High School: School name: School address: School city, state, zip: School name: School name: School address:	d Information Technology (Constraints of the second	GCIT) – 1 year program 26 Credit iversity? Number of years comple Number of years complete	ted:

Did you graduate? [] Y or [] N				
Degree / diploma earned:				
B.#*1*4				
<u>Military:</u>				
Branch:				
Rank in Military:				
Total Years of Service:				
Skills/duties:				
Related details:				
If you are transferring to S				
Name of the Institution you	are transferring from	m:	<u>.</u>	
Address of the Institution:				
	Street	City	State	Zip Code
Reason for transfer:				

	PROGRAM	INFORMATION /	CATALOG A	ACKNOWLEDGMENT
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Start Date of Program Selected:
Expected End Date of Program Selected:
Check academic calendar for program dates http://www.ssu.edu/academics/academic-calendar/
Catalog Signature: I, have received a copy of the version of the catalog that I will be bound to and understand it is a part
f the enrollment agreement.
By signing below, I hereby acknowledge that I have reviewed the SSU general Catalog.
Signature Date
Effective Catalog Date:
DISCLAIMER: While programs are designed to prepare graduates to pursue employment in the field, or for obs in related fields, the School cannot guarantee or promise that any student will be placed in any job or blaced at all. While the School will assist students with job placement, finding a job is the individual responsibility of the student.
obs in related fields, the School cannot guarantee or promise that any student will be placed in any job or blaced at all. While the School will assist students with job placement, finding a job is the individual
obs in related fields, the School cannot guarantee or promise that any student will be placed in any job or olaced at all. While the School will assist students with job placement, finding a job is the individual esponsibility of the student. understand that enrollment is conditional, pending receipt of the following: verification of proficiency in English, enrollment agreement, official ranscripts, verification of licenses, resume or curriculum vitae, letters of recommendation and autobiography (if applicable).

SOUTHERN STATES UNIVERSITY – LAS VEGAS ENROLLMENT AGREEMENT

Last Name		
First Name	Middle Name	
Social Security Number (if you have one)		
Home Address (foreign students - this is the addr	ess where your I-20 will be	mailed)
City	_ State	_ Zip
Daytime Phone	_Work Phone	
E-Mail		
Fax Number		

This agreement is a legally binding instrument when signed by the student and accepted by the University. Your signature on this agreement acknowledges that you have been given reasonable time to read and understand it, and that you have been given: (a) a written statement of the refund policy and (b) a chance to review the SSU General Catalog, including a description of the program of study and all material facts concerning the school which are likely to affect your decision to enroll. The SSU Catalog can be found on SSU's home page at www.ssu.edu. Upon acceptance, a copy of this agreement shall be sent to you for your records.

Southern States University has met the disclosure requirements of Education Code 94810 of the Private and Postsecondary and Vocational Reform Act of January 1, 2002.

TRANSFERABILITY OF COURSEWORK

The transferability of credits you earn at Southern States University is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the degree or coursework you earn in SSU programs is also at the complete discretion of the institution to which you may seek to transfer. If the credits or degree that you earn at this institution are not accepted at the institution to which you seek to transfer, you may be required to repeat some or all your coursework at that institution. For this reason, you should make certain that your attendance at this institution will meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending SSU to determine if your credits or degree will transfer.

Degree and certificate students may request transfer credit under the school's transfer credit policy as stated in the Catalog. For any transfer credit that is awarded at SSU for previous training or experience, the student will not be asked to pay for the tuition cost of units of the awarded credit.

NEVADA STUDENTS: Student Refund Policy (State of Nevada Code: NRS 394.449)

To cancel enrollment and/or obtain a refund, the student must provide written notice to the Office of the Registrar. A refund will be calculated pursuant to State of Nevada regulation NRS 394.449

The refund policy according to the State of Nevada regulation NRS 394.449 is:

1. Each postsecondary educational institution shall have a policy for refunds which at least provides:

(a) That if the institution has substantially failed to furnish the training program agreed upon in the enrollment agreement, the institution shall refund to a student all the money the student has paid.

(b) That if a student cancels his or her enrollment before the start of the training program, the institution shall refund to the student all the money the student has paid, minus 10 percent of the tuition agreed upon in the enrollment agreement or \$150, whichever is less.

(c) That if a student withdraws or is expelled by the institution after the start of the training program and before the completion of more than 60 percent of the program, the institution shall refund to the student a pro rata amount of the tuition agreed upon in the enrollment agreement, minus 10 percent of the tuition agreed upon in the enrollment agreement, minus 10 percent of the tuition agreed upon in the enrollment agreement or \$150, whichever is less.

(d) That if a student withdraws or is expelled by the institution after completion of more than 60 percent of the training program, the institution is not required to refund the student any money and may charge the student the entire cost of the tuition agreed upon in the enrollment agreement.

2. If a refund is owed pursuant to subsection 1, the institution shall pay the refund to the person or entity who paid the tuition within 15 calendar days after the:

(a) Date of cancellation by a student of his or her enrollment.

(b) Date of termination by the institution of the enrollment of a student.

(c) Last day of an authorized leave of absence if a student fails to return after the period of authorized absence; or

(d) Last day of attendance of a student, whichever is applicable.

3. Books, educational supplies or equipment for individual use are not included in the policy for refund required by subsection 1, and a separate refund must be paid by the institution to the student if those items were not used by the student. Disputes must be resolved by the Administrator for refunds required by this subsection on a case-by-case basis.

4. For the purposes of this section:

(a) The period of a student's attendance must be measured from the first day of instruction as set forth in the enrollment agreement through the student's last day of actual attendance, regardless of absences.

(b) The period of time for a training program is the period set forth in the enrollment agreement.

(c) Tuition must be calculated using the tuition and fees set forth in the enrollment agreement and does not include books, educational supplies or equipment that is listed separately from the tuition and fees.

The student has the right to cancel the Enrollment Agreement and obtain a refund of charges paid for attendance through the first-class session or the seventh day after enrollment, whichever is later. To cancel enrollment and/or obtain a refund, the student must provide a written notice to the Office of the Registrar. If the student cancels the Enrollment Agreement, the School will refund any money that s/he has paid, less any deduction for non-refundable fees, and for any equipment not returned in good condition, within fifteen (15) days after the student's Notice of Cancellation is received.

Effective October 1, 2021: If the University substantially fails to furnish a course or program as agreed upon in the enrollment agreement, SSU shall refund to a student all the money the student has paid.

Nevada Students - Account for Student Indemnification

The Commission on Postsecondary Education maintains a tuition indemnification fund that may be used to refund students in the event of a school's closure. In order to file a complaint, please contact:

Nevada Commission on Postsecondary Education 2800 E. St. Louis Las Vegas, Nevada 89104 Telephone: (702) 486-7330 Fax (702) 486-7340

NRS 394.553 Account for Student Indemnification.

1. The Account for Student Indemnification is hereby created in the State General Fund. The existence of the Account does not create a right in any person to receive money from the Account. The Administrator shall administer the Account in accordance with regulations adopted by the Commission.

2. Except as otherwise limited by subsection 3, the money in the Account may be used to indemnify any student or enrollee who has suffered damage as a result of:

(a) The discontinuance of operation of a postsecondary educational institution licensed in this state; or(b) The violation by such an institution of any provision of NRS 394.383 to 394.560, inclusive, or the regulations adopted pursuant thereto.

3. If a student or enrollee is entitled to indemnification from a surety bond pursuant to NRS 394.480, the bond must be used to indemnify the student or enrollee before any money in the Account may be used for indemnification.

4. In addition to the expenditures made for indemnification pursuant to subsection 2, the Administrator may use the money in the Account to pay extraordinary expenses incurred to investigate claims for indemnification or resulting from the discontinuance of the operation of a postsecondary educational institution licensed in this state. Money expended pursuant to this subsection must not exceed, for each institution for which indemnification is made, 15 percent of the total amount expended for indemnification pursuant to subsection 2 or \$10,000, whichever is less.

5. No expenditure may be made from the Account if the expenditure would cause the balance in the Account to fall below \$10,000.

6. Interest and income earned on the money in the Account, after deducting any applicable charges, must be credited to the Account.

7. The money in the Account does not lapse to the State General Fund at the end of any fiscal year.

NETHOD3		
Credit Card:		
Name on Card		
Card Number		
Expiration Date CVV Number		
Billing Address of the Card		
Phone Number of Cardolder		
Check/Money Order: E	check	
ke check payable to Southern States University, 1094 Cudah 0175. <i>(Note: Any check returned unpaid by the bank will incu</i>		one: (619) 298-1829; Fax:
Bank Wire Transfer:		
The following is the information requested concern	ning your wire transfer:	
Bank Name: Wells Fargo Bank Branch: San Diego - CA	Account Number: Routing Number: SWIFT Code:	7655659501 121000248 WFBIUS6S
Wire Beneficiary: Southern States Un 1094 Cudahy PI, Su		

(Note: Wells Fargo Bank charges \$30.00 for the wire transfer fee. Be sure to include this amount to the total fee).

Acceptance of Enrollment Agreement

I acknowledge that I am obligated to pay for the program of instruction selected, and for all other services and materials furnished or made available by the school, including any charges made by the school for books and supplies, and any other fees and expenses that I incur upon enrollment. I understand that I will not be able to graduate or receive my diploma prior to full payment of all fees and charges. If the payment plan extends beyond the program completion date, I agree that I am obligated to pay all fees and charges documented on the Fees and Charges page of this agreement, subject to the refund policy which is also documented in this agreement.

A Nevada student who wishes to file a complaint about this institution, may contact the State of Nevada Commission on Postsecondary Education at 2800 E St Louis, Las Vegas, NV 89104; Telephone: (702) 486-7330; Fax (708) 486-7340.

Prior to signing this enrollment agreement, you must be given a catalog or brochure, which you are encouraged to review prior to signing this agreement. These documents contain important policies and performance data for this institution.

I certify that I have received the current Catalog.

I am aware that the current SSU General Catalog is located on the SSU's website, www.ssu.edu, and is readily accessible to all students and the general public and that the information contained in the current catalog is part of this enrollment agreement. Furthermore, I acknowledge that the current catalog is subject to change throughout my program of study and any changes will apply to my program.



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TOTAL CHARGES FOR THE CURRENT PERIOD OF ATTENDANCE:	\$(chosen payment plan)
ESTIMATED TOTAL CHARGES FOR THE ENTIRE EDUCATIONAL PROGRAM:	(total cost of your program)
TOTAL CHARGES STUDENT IS OBLIGATED TO PAY UPON ENROLLMENT:	\$(enrollment fees)
l understand that this is a legally binding contract. My signature below certifies that I l and agreed to my rights and responsibilities, and that the institution's cancellation an been clearly explained to me.	
I,, declare the information I have disclosed hereir accurate.	n is both true and
Signature of Student: I	Date:
Signature of Director of Admissions: I	Date:
Location of Instruction	
Las Vegas: 2000 South Jones Boulevard Suite 120 Las Vegas, NV 89146 Phone: (702) 786-3788 Fax: (619) 704-1002 Email: <u>Ivadmissions@ssu.edu</u>	
	Student Initia