

Pre-Enrollment Receipt

Student Name: _____

- ☐ Cosmetology Operator ☐ Barber ☐ Esthetician ☐ Manicurist ☐ Manicurist/Esthetician
- ☐ Hybrid-Cosmetology Operator ☐ Hybrid-Barber ☐ Hybrid-Esthetician ☐ Hybrid-Manicurist ☐ Hybrid-Manicurist/Esthetician
- ☐ Eyelash Extensionist ☐ Operator Crossover

Before signing an Enrollment Agreement Contract, I have received access to the information in the form of Total Transformation Institute's Online Catalog available at www.ttioc.edu as it relates to the following topics:

- _____ Institute Catalog
- _____ Address for Texas Department of Licensing and Regulation (TDLR)
- _____ Program overview with Syllabus to be received during Orientation
- _____ Licensure Requirements
- _____ Pre-Requisites for Employment
- _____ Institute's Refund Policy
- _____ Institute's SAP Policy
- _____ Institute's Grievance/Formal Complaint Policy
- _____ Distance Education Policies (If applicable)
- _____ Physical demands of the profession
- _____ Compensation a graduate can reasonably expect
- _____ Safety requirements of the profession
- _____ Institute's Completion Rate
- _____ Institute's Licensure Rate
- _____ Institute's Placement Rate
- _____ Notice of Federal Student Financial Aid Penalties for Drug Law Violations

Student Signature: _____ **Date:** _____