



**J. Johnson Education Center & Supportive Homecare Services, Ltd.**

7905 W. Appleton Avenue

Suite 202

Milwaukee, WI 53218

Ph: (414)438-9390 Fax: (414)438-9392

**CBRF & CPR ENROLLMENT FORM**

Today's Date \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name Middle Initial Maiden Name

\_\_\_\_\_  
Address City State Zip Code

\_\_\_\_\_  
Mailing Address (if different) City State Zip Code

\_\_\_\_\_  
Email Address

Home Phone \_\_\_\_\_ Alternate \_\_\_\_\_

Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_

Ethnic Origin \_\_\_\_\_ High School \_\_\_\_\_  
Name of School

High School Diploma or GED \_\_\_\_\_ Year \_\_\_\_\_

Highest year of school completed (Circle One)

6 7 8 9 10 11 12 13 14 15 16

**How did you hear about us? (Please check one)**

- ☐ Advertisement
- ☐ Family or Friend
- ☐ Search Engine
- ☐ WI Department of Quality Assurance
- ☐ [www.jjohnsoneducation.com](http://www.jjohnsoneducation.com)
- ☐ Other (specify) \_\_\_\_\_



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**STUDENT AGREEMENT FORM**

I, \_\_\_\_\_ understand tuition for my CBRF class(es) is as listed below. This tuition fee ***includes*** training, training materials and the registry fee that must be submitted to UW Green Bay to place my name on the registry. I am paying \$\_\_\_\_\_ today for the CBRF/CPR class(es) indicated below. Additionally, I have indicated the training dates for the classes I have enrolled in as follows:

**Date of Class (month/year)**

My Medication Administration class is scheduled to start	_____	Fee for this class is: \$170.00*
My Standard Precautions class is scheduled to start	_____	Fee for this class is: \$60.00
My First Aid & Choking class is scheduled to start	_____	Fee for this class is: \$130.00
My Fire Safety class is scheduled to start	_____	Fee for this class is: \$75.00
My CPR class is scheduled to start	_____	Fee for this class is: \$115.00
My Resident Rights, client group specific, challenging behaviors, needs assessment/individual service plan (ISP) and nutrition/dietary, personal cares...	_____	Fee is: \$150.00

\*Fee for repeat of Medication Administration class is \$100.00

My initials here \_\_\_\_\_ indicate I have read and understood my payment was made to hold a slot for me in class and is **Non-refundable**. I will be offered one (1) opportunity to either reschedule class or send someone in my place (only in the event I cannot attend the entire class). If I fail to attend the rescheduled class, I will not be given another opportunity to take the class and the money I paid for the class will not be refunded. If the person I assigned to take my place fails to attend the class neither they or myself will be given another opportunity to take the class and the money I paid for the class will not be refunded. If I plan to reschedule a full class or send someone in my place to a class, I must inform J. Johnson Education Center in writing **three (3) business days before** my intended course. Classes cannot be rescheduled in parts or in half. If I am tardy to class I will have to reschedule my class. No exception.

I understand all students share the responsibility for maintaining an appropriate, orderly learning environment. **If I fail to adhere to the behavioral expectations of JJEC, I recognize and understand I will be subject to discipline. This discipline can be a verbal warning up to and including dismissal from my class. If I am dismissed from my course any course fees, I have paid will be forfeited and will not be returned to me.** Behaviors that will not be tolerated are: tardiness, absence, dressing inappropriately for a classroom environment (e.g. Skin tight clothing, strapless shirts, tank tops, skirts or shorts more than 2 inches above the knees, and sheer shirts are not acceptable in the classroom), persistent speaking without permission, engaging in activities not related to the class, inappropriate use of electronic devices, cell phones, or pagers during class, sleeping in class, disputing authority and arguing with instructors and other students, threats of any kind, harassment, physical altercations, destruction of property and any behavior that puts the health or safety of the instructor or other students in the classroom in jeopardy.

I understand that classes and class times are subject to change at any time. J. Johnson Education Center, LTD. has a no refund policy, however, if we have to for some reason, cancel a class and you are unable to attend, we will issue you a refund in the form of a check, within sixty (60) days after the reschedule. This is the **ONLY** exception that will be made in reference to refunds.



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My initials on the previous page and my signature below indicate that I have read the above information, it has been discussed with me and I agree to the terms of this agreement and enrollment form.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator or Authorized Employee Signature

\_\_\_\_\_  
Date

Please be aware that course dates and times are subject to change. Courses may be added, delayed or cancelled