



CGMS Tuition Agreement

Please note that this document is due at the time of enrollment.

Adult Learner Name _____

Program Applying for (e.g. Infant/Toddler Full Certificate) _____

Party responsible for payments (if multiple parties paying, indicate percentage of responsibility)

- Applicant
- Sponsoring School – Head of School or Contact Person /phone number/email _____
- Other - Payer name and phone number _____
Other payer relationship to adult learner _____

Important Note

All funds are denominated in and must be rendered in US currency. Foreign bank drafts, including those from Canada, must account for currency differences and the cost of settlement.

Withdrawals and Refunds

Application Fees are non-refundable. All tuition and fees (less the application fee) paid by the applicant shall be refunded if requested within 3 business days after signing a contract. All refunds shall be returned within 30 days. All tuition and fees paid by the applicant shall be refunded if requested within three business days after signing a contract with the school. All other refunds are due according to the following schedule:

Withdrawal after the Residential Session

Withdrawal after attendance at a residential session will result in responsibility for \$1600 per session attended. This will be taken into consideration when calculating refunds or balance due, along with the following policies regarding withdrawal during the distance-learning phase.

Withdrawal during the Distance Learning Phase

- Before the end of week # 2 of the distance learning phase - 90% of the base tuition will be refunded. A withdrawing adult learner is responsible for paying 10% of the total base tuition.
- Before the end of week #8 or end of the first module of the distance learning phase, 80% of the base tuition will be refunded. A withdrawing adult learner is responsible for paying 20% of the total base tuition.
- Before the end of the second module, 60% of the base tuition will be refunded. A withdrawing adult learner is responsible for paying 40% of the total base tuition.
- By the end of the third module, 30% of the base tuition will be refunded. A withdrawing adult learner is responsible for paying 70% of the total base tuition.
- By the end of the end of the fourth module, 20% of the base tuition will be refunded. A withdrawing adult learner is responsible for paying 80% of the base total tuition.
- No refunds will be made for withdrawals after the fourth module, and adult learners making payments are still responsible for the entire tuition.

Please initial this page to indicate understanding and agreement _____

Preferred Payment Option

The application fee of \$100 is due with this application.

The first payment as listed below **must** be scheduled as soon as the Tuition Agreement is submitted to Finance, and must be paid no later than 30 days. CGMS may, at its discretion, break larger credit card tuition payments into smaller amounts without additional charges to the adult learner. We are happy to create custom payment plans on request; contact us at financialaid@cgms.edu to discuss your needs. If such a plan has been created, CGMS will provide a substitute agreement for this form.

Tuition and Fee Schedule

Tuition

	Program	Certificate	
<input type="checkbox"/>	Infant/Toddler	Associate	\$4990
<input type="checkbox"/>	Infant/Toddler	Full	\$6620
<input type="checkbox"/>	Early Childhood	Associate	\$4990
<input type="checkbox"/>	Early Childhood	Full	\$6620
<input type="checkbox"/>	Elementary I	Full	\$6620
<input type="checkbox"/>	Elementary II	Full	\$6620
<input type="checkbox"/>	Elementary I&II	Full	\$9010
<input type="checkbox"/>	Secondary	Full	\$9010

If Field Consultants need to travel more than 100 miles, then reasonable travel expenses will also need to be covered.

Elementary I and I-II Adult Learners Please Note

The EC Overview Course is mandatory if applicant has not received a Montessori early childhood credential from an accredited institution.

- | | | |
|--------------------------|-------------|-----------------|
| <input type="checkbox"/> | EC Overview | six weeks \$360 |
|--------------------------|-------------|-----------------|

Please sign this page indicating understanding and agreement: _____

Fees

Service fee - Please check your desired payment schedule

	# payments	Schedule	Service fee
<input type="checkbox"/>	1	one time	\$0
<input type="checkbox"/>	3	Every 3 months	\$200
<input type="checkbox"/>	6	Bi-monthly	\$300
<input type="checkbox"/>	18	Monthly	\$500
<input type="checkbox"/>	24	Monthly	\$600 (only eligible for the EL I-II program)

Note: the service fee is a one-time charge added to the total bill. It is not per-payment.

Professional Fee

This mandatory fee covers the cost of registering you with our various accrediting bodies. Additional Professional fees will apply when transferring to a different certification level and/or returning after an absence of 2 years.

- \$350

Self-directed fees - Please check one

	Supervised (A Supervising Teacher with an accredited Montessori Credential in your age level, who is in at least the third year of teaching post-certification, will be in the classroom with you at all times)	\$0
	Self Directed with Mentor on site (A Mentor with an accredited Montessori Credential in your age level, who is in at least the third year of teaching post-certification, is on site and agrees to weekly meetings and monthly observations in your classroom)	\$600
	Self Directed, no onsite Mentor (this option is a minimum fee of \$600 and additional fees will apply as determined by the director and practicum team)	\$600 (additional fees will apply)

Total (Tuition + Fees) _____ **Amt. per payment (total divided by # of payments)** _____

Example:

Sara is taking the Elementary I course while at the same time serving as the lead teacher in her classroom. She wishes to pay in three installments. Sara will not need to take the EC overview course, because she previously received her early childhood credential from a MACTE accredited training course. Sarah's total tuition is (\$6,620 tuition) + (\$200 service fee) + (\$350 professional fee) + (\$600 self-directed fee), or \$7,770. She will pay in three installments of \$2,590 each. This does not include the \$100 she will pay at the time of her application.

Please sign this page indicating understanding and agreement: _____

Other payment plan as discussed and agreed upon with a CGMS tuition counselor (details below)

Multiple Parties Paying?

- Yes If multiple parties are contributing to the tuition then all must sign this document. Please describe in detail here the arrangement of responsibility.

Preferred Payment Method

- Check Make payable to The Center for Guided Montessori Studies and ensure that all funds are in US dollars. Please note payments should be mailed to the North Carolina address rather than the Florida office.

- Visa Master Card American Express

If you are paying by credit card, indicate so above. We will collect your credit card information upon acceptance into the program.

Referring person:

Did anyone refer you to the CGMS program, if so who? _____

Please sign this page indicating understanding and agreement: _____

Please sign the following statement. By signing you agree to the statement below.

The information given in this application and tuition agreement form is correct. I understand that a \$100 application fee is due with this document, and that unless I am a resident of the state of Michigan this application fee is entirely non-refundable if I am not accepted. I understand that if I am accepted in the program I am responsible for the full tuition and agree that payments will be made in a timely manner. I agree to the refund policy in this document. I understand that an unpaid balance may be submitted to a collection agency, and that said unpaid balance may result in termination of enrollment, and/or delay certification upon completion of course requirements.

Applicant's Signature _____

Signature - Head of School from

Sponsoring School (if applicable) _____

Date of understanding and agreement of this document _____

Please scan this form to admissions@cgms.edu, fax to 941-827-2981, or mail to:

**CGMS
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Suite 233
Tampa, FL 33609**