

# Pharmacy Technician Certificate Program Enrollment Contract

**Address:** PO BOX 683148, Houston, TX 77268  
**Phone:** 888-247-8700 **Fax:** 888-247-8706

**Web:** www.pharmacytechnician.org/institute  
**E-Mail:** institute@pharmacytechnician.org

STUDENT INFORMATION <sup>1</sup>		
LAST NAME:	FIRST NAME:	
MAILING ADDRESS:		
CITY:	STATE:	ZIP:
EMAIL ADDRESS:		DATE OF BIRTH:
HOME PHONE:		WORK PHONE:
CELL PHONE:	Social Security Number:	
EMERGENCY CONTACT NAME:		
EMERGENCY CONTACT PHONE:		
EDUCATION <sup>2</sup>		
EDUCATION: <input type="checkbox"/> HIGH SCHOOL DIPLOMA <input type="checkbox"/> GED GRADUATION (MO/YR):		
NAME OF HIGH SCHOOL/AGENCY:		
ADDRESS OF HIGH SCHOOL/AGENCY (CITY/STATE):		

1. Student may also be referred to as BUYER in Terms and Conditions. 2. A high school diploma or GED equivalent is required for admission to the program.

TUITION FEE & PAYMENT PLANS					
<b>NPTA Official Pharmacy Technician Diploma Program.....Tuition Charge \$2299<sup>3</sup></b>					
Payment Plan <i>Select One</i>	Initial Payment	Monthly Charges	# of Monthly Charges	Monthly Charges Total	Total Cost, <sup>4</sup>
<input type="checkbox"/> <b>A5</b>	<b>\$1899</b>	<b>\$ 0</b>	<b>0</b>	<b>0</b>	<b>\$1899</b>
<input type="checkbox"/> <b>B6,7</b>	<b>\$ 259</b>	<b>\$ 120</b>	<b>17</b>	<b>\$2040</b>	<b>\$2299</b>

3. Tuition includes all required textbooks and learning materials. A \$400 tuition discount is provided to students who pay in full at time of registration (A). 4. Tuition charge is non-refundable and non-transferable. 5. A \$400 tuition discount is provided to students who pay in full at time of registration (A). 6. Students will have access to the courses prorated to correspond to their monthly payment plan. 7. No interest fee is charged to the students enrolled in the monthly payment plan option (B).

BILLING INFORMATION FOR INITIAL PAYMENT	
AMOUNT: <input type="checkbox"/> \$1899 (A) <input type="checkbox"/> \$259 (B)	REGISTERED ONLINE: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> CHECK (payable to NPTA) <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER <input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA <input type="checkbox"/> MONEY ORDER	
CARD NUMBER:	EXP. DATE:
CARDHOLDER NAME:	
BILLING ADDRESS:	BILLING ZIP:
CARDHOLDER SIGNATURE:	DATE:
FOR MONTHLY CHARGES <i>(must be completed if payment plan B is selected)</i>	
\$120 MONTHLY CHARGE (X 17 MONTHS)	<input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER <input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA
CARDHOLDER NAME:	EXP. DATE:
BILLING ADDRESS:	BILLING ZIP:
CARDHOLDER SIGNATURE:	DATE:

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**TERMS/CONDITIONS**

**1. ELIGIBILITY & ACCEPTANCE** Students must be 18 years of age or older and have obtained a high school diploma or GED equivalent and have no record of any felony convictions or drug related convictions, including misdemeanors. If accepted by NPTA, a signed copy of this Enrollment Contract will be returned to the student along with the Student Orientation Kit, textbook(s) and [access to] course material. **2. TUITION** Depending upon the payment plan selected, tuition is payable either in full or on seventeen (17) monthly payments in addition to the initial payment. Tuition is payable in US funds; initial payments may be made by check (drawn on a US bank), credit card or money order. Recurring monthly payments will be automatically deducted from the credit card account listed on this contract. The program consists of nine individual courses. Students using payment plan (B) may make early or additional payments by calling 888-247-8700. The student understands that he/she is solely responsible for accessing the Internet program and for all related fees, i.e. appropriate computer equipment, an Internet Service Provider and all technical requirements listed at [www.pharmacytechnician.org/nireq](http://www.pharmacytechnician.org/nireq) **3. PAST DUE PAYMENTS** If the student fails to make any scheduled tuition payment within 10 calendar days of its due date, NPTA reserves the right to cancel this contract. Upon such cancellation, the balance of the tuition owed will become due and payable immediately.

**4. CERTIFICATE** A certificate will be awarded to the student upon successful completion (70% average or higher) of all nine courses associated with this program, and if the student has no outstanding financial obligations to NPTA. Should the student elect to not participate in the pharmacy externship will receive a certificate indicating "No Externship Completed" upon successful completion of all other course requirements. **5. PROGRAM LENGTH** This is a self-paced program, however students have twelve (12) months from the official date of enrollment to complete the program. After twelve months, students may extend the program for a extension fee of \$100 per month (30 calendar days). **6. INSTRUCTION** This is an online, self-paced program. The student is solely responsible for establishing their own schedule and for completion of the program and course work. NPTA will provide the student with the required textbook(s) and access to the course material online. An NPTA faculty member will answer student questions, via e-mail correspondence, and provide reasonable assistance, electronically, to the student with the course material. **7. EXTERNSHIP** Students will be required to complete 120 hours of practical experience through an externship program, for completion of the full program. Externships may be completed at one facility, or broken up into two 60-hour or three 40-hour externships, providing the student with hands-on exposure to more than one practice setting. Externships are non-paid and depending upon the facility, students may be required to obtain student liability insurance, vaccinations and/or undergo drug testing. These products/services are not included in the tuition fee and shall be the responsibility of the student. NPTA will assist the student in the process of securing an externship site, however it is the responsibility of the student to secure an approved externship site and proctor. **8. EMPLOYMENT** NPTA does not guarantee job placement, employment or employment eligibility in a specific state. The requirements to practice as a pharmacy technician vary by state and are established/regulated by individual state boards of pharmacy. NPTA makes no warranties or representations as to whether the Official NPTA Pharmacy Technician Diploma Program meets the regulatory requirements to practice as a pharmacy technician within a specific state. This program does not cover any fee(s) assessed by the State Board of Pharmacy to practice as a pharmacy technician. **9. CERTIFICATION** This program is for educational and training purposes only; this program does not grant the student with any specific credentials, including but not limited to "CPhT" or "Certified Pharmacy Technician". NPTA does not guarantee students will pass a national certification exam. It is the students sole responsibility to verify the eligibility requirements for national certification. This program does not cover any fee(s) related to applying for a national certification exam. **10. REFUNDS** This program is non-refundable and non-transferable, with the following exceptions: (1) All monies will be refunded if the student is not accepted into the program by NPTA, or if the student cancels in writing within five calendar days after midnight of the day on which the Enrollment Contract was signed.

**11. HOLD HARMLESS** The student indemnifies, covenants not to sue and holds harmless from any and all liability, claims, costs and expenses whatsoever arising out of or related to NPTA's Pharmacy Technician Certificate Program.

**I have read the terms and conditions contained in the Enrollment Contract and understand that this Contract constitutes a binding contract upon acceptance by NPTA. I attest that I am 18 years of age, or older, have a High School Diploma or GED equivalent and have not been convicted or plead guilty to a felony or any drug-related offense.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**FOR OFFICIAL USE ONLY (do not write in this space)**

Date Rcvd: \_\_\_\_\_ Approved by: \_\_\_\_\_

Student ID: \_\_\_\_\_

(A) \_\_\_\_\_ (B) \_\_\_\_\_

SD: \_\_\_\_\_ N: \_\_\_\_\_

**INITIALS** \_\_\_\_\_