



ENROLLMENT CANCELLATION AGREEMENT

N16W23217 Stone Ridge Drive, Suite 290

Waukesha, WI 53188

Email: records@pdhacademy.com

888-374-4096

PDH Academy Licensed to Operate by the Nevada Commission on Postsecondary Education

Submission of this form within 3 days from the date of signing the agreement and prior to starting the program cancels the applicant's enrollment and entitles the applicant to a 100% refund of all monies paid.

Last Name	First Name	Middle Initial	Phone Number
Student's Address	City	State	Zip
Student's Email Address	Program Title	Clock Hours	Program Scheduled Start Date
	Structural Inspection Pre-License Course	60	
Program Tuition	Total Amount Paid	Date Paid	
\$995.00			

_____	_____
SIGNATURE OF STUDENT	DATE SIGNED

_____	_____
SIGNATURE OF SCHOOL REPRESENTATIVE	DATE SIGNED