

College Partnership Program Agreement

Names:	Social Security #:	HS Graduation Yr:			
Parent			Address		
Parent			City	State	Zip
Student			Home Phone ()	Work Phone ()	
Student E-mail			Parent E-mail		

COLLEGE PARTNERSHIP PROGRAM DESCRIPTION

- CoMIT™ Software:** the Client will be provided the CoMIT software program, which assesses the student's career interests, provides a list of potential college majors, and equates those majors to possible careers. Also provides knowledge and skill requirements for potential careers, career videos, and a link to the O*NET™
- College Action Plan™:** the Client will be provided an action plan, which will include:
 - Key information about college admissions, applications, standardized testing, campus visits, essays, recommendation letters, FAFSA, SAR, award letters, negotiations, loans, and other information related to the high school-to-college transition process.
 - A planning calendar and a list of action steps, which identify key dates and events.
 - Instruction on evaluating colleges and universities.
 - The College Action Plan Video.
- Financial Analysis and College Report Summary:** After receiving a completed College Planning Questionnaire from the Client, CP will provide the Client the following customized information:

Financial Analysis:

 - Analyze the family's current financial situation with respect to college planning.
 - Calculate the family's Expected Family Contribution (EFC) based on the formulas of the Federal Methodology and provide a list of possible strategies that may reduce the EFC.

College Report Summary:

 - Provide information for each college regarding academic programs, extracurricular programs, college faculty/staffing, student body information, housing information, student services, computer/library services, school athletics, and key dates and events.
 - Provide college admission requirements and policies, with respect to high school course requirements, standardized testing, special requirements, and AP/CLEP testing.
 - Calculate estimates for final out-of-pocket costs in order to provide a list of the 25 most affordable colleges, based on the student's prescribed needs and academic abilities.
 - Provide a custom financial need-analysis report for each of the 25 colleges, including historical percentages and types of financial aid packages offered.
- Study Strategies:** CP will provide personal access codes to a website that teaches the five fundamental study habits – learning styles, time management, memory development, note taking, and test taking strategies.
- CP Test-Prep System:** CP will provide the Client with test-prep software for the PSAT, SAT I, and ACT tests with accompanying video and a practice test booklet for the SAT I and PSAT. Free updates to this software will be available for the upcoming PSAT and SAT changes.
- Merit Aid Information:** Provide the Client personal access codes to a proprietary website to obtain information about merit aid awards available at over 1100 U.S. colleges. Includes information about merit-aid amounts, availability, and selection criteria.
- Student Presentation:** After receiving the CP Student Presentation Form from the Client, CP will present the student's information to appropriate colleges and universities.
- FAFSA Answer Key:** After receiving the FAFSA Answer Key Questionnaire from the Client, CP will provide an answer key for completing the FAFSA during the student's senior year of high school and for each year the student is enrolled in undergraduate studies. (The Client is responsible for providing updated information every year)
- Coaching:** The Client may call the CP coaching team, toll-free, Monday-Friday, 7AM-11PM CST, with any questions about the high school-to-college transition process, until the student graduates from high school.



College Partnership Standard Program Fee - \$1495

- \$1495
- 4 - Payment Plan:** \$395 down plus 3 monthly payments of \$395.
- \$149 down plus 16 payments of \$96.50. Client will sign a Retail Installment Contract.

Client Acknowledgements:

- The Client acknowledges that certain items listed in the "CP Program Description" cannot be provided until CP receives the applicable questionnaires and forms. Failure to utilize any or all of the items in the "CP Program Description" for any reason or failure to submit the appropriate information to CP does not entitle the Client to receive a refund of monies paid or a release from payment obligations.
- CP's Student Presentation does not intend, and does not attempt, to place a student with any particular college or university. The Client authorizes CP to promote their student based on the Client's preferences, the academic standards of the colleges and universities, and the professional judgement of the CP staff. Final determination of colleges to which students will be presented will be made at the sole discretion of CP.
- The Client acknowledges that if the student is within six months of graduating from high school and has not made a reasonable effort to complete the necessary paperwork for admissions and financial aid, or is not considering attending an accredited four-year college or university, he or she may not realize the full benefit of our program.
- The Client acknowledges that if the student is not a U.S. Citizen, he or she may not be eligible for financial aid or college admission and thus may not realize the full benefits of the CP program.
- The Client is entitled to a refund of monies if CP does not make available the items listed in the "CP Program Description."

I, the Client, have read, understand, and agree to the "Client Acknowledgements" as outlined above in items 1-5. [Initials] _____

Disclaimer: CP's program is provided to assist families in planning and preparing for college. Purchasing CP's program does not guarantee that a student will be accepted by any college or university. CP does not guarantee that a consumer will receive financial aid or receive more financial aid than would otherwise be obtained without the assistance of CP or that applying any or all suggested strategies will result in an increase in financial aid eligibility. While CP makes every effort to ensure the accuracy of all information, we reserve the right to make corrections if an error does occur. CP is not liable for the accuracy of the information provided by the family. CP will make the final determination on the clients it will accept for its program. CP reserves the right not to accept a student who, in our opinion, does not have a reasonable chance to benefit from our program. CP is not affiliated with any high school, college, university, and is not government affiliated.

CERTIFICATION

Your signature certifies that you have read and understand the terms of the CP Program Agreement and acknowledge that you have received a copy of this form.

⊗ _____ Transaction Date _____
Signature (Parent or Legal Guardian)

_____ Number _____
Signature (CP Representative)

COLLEGE PARTNERSHIP, INC.

(Home office use only)
Family Number

801 W. Freeway • Suite 800 • Grand Prairie, Texas 75051 • (800) 677-1077

AUTHORIZATION AGREEMENT FOR BANK DEBIT

I hereby authorize College Partnership, Inc. (CP) or its designee, to initiate debit entries to my checking account and, if necessary, credit entries and adjustments for my debit entries in error at the bank, credit union, or other depository institution as identified on the attached voided check or photocopied check or depository information authorization as identified below.

PURCHASER NAME: _____ (PLEASE PRINT CLEARLY)

Check applicable boxes:

<input type="checkbox"/> Checking Account Debit \$1495
<input type="checkbox"/> \$395 down payment due today; and 3 monthly payments of \$395 each, beginning ____/____/____.

(Home Office Use Only):

<input type="checkbox"/> Checking Account Debit \$ _____
<input type="checkbox"/> \$ _____ down payment due today; and 3 monthly payments of \$ _____ each, beginning ____/____/____.

This payment authorization remains in full force and effect until College Partnership receives written notice of termination from me; notice must be made at least 5 business days prior to the payment due date. If I desire to revoke authorization of my account, I must first make alternative billing arrangements. Revoking authorization does not release me from my financial obligation to College Partnership, and does not serve as a means to cancel the College Partnership Program Agreement.

PURCHASER SIGNATURE: _____ **Date:** ____/____/____

COMPLETE THE INFORMATION BELOW

PURCHASER'S NAME AS IT APPEARS ON ACCOUNT _____	NAME OF BANK, S&L, OR CREDIT UNION _____
Checking <input type="checkbox"/> Savings <input type="checkbox"/>	ADDRESS OF BANK, S&L, OR CREDIT UNION _____
(Use exact numbers as they appear on the check)	
(Routing Number) _____	(Account Number) _____

RETAIL INSTALLMENT CONTRACT

Purchaser:
 Name: _____
 Address: _____

Seller:
 College Partnership, Inc.
 801 W. Freeway, Suite 800
 Grand Prairie, TX 75051

Home Phone: _____ Cell Phone: _____ Work Phone: _____ Employer: _____

As used in this Contract, the terms "you" and "yours" mean each Purchaser that signs this Contract and "we," "us" and "our" means the Seller named above. You are purchasing the College Partnership Program from us and the associated services and goods, as described in your College Partnership Program Agreement (the "Program"). We are financing your purchase of that Program over time.

ANNUAL PERCENTAGE RATE	FINANCE CHARGE	Amount Financed	Total Of Payments	Total Sale Price
The cost of your credit as a yearly rate	The dollar amount the credit will cost you	The amount of credit provided to you or on your behalf	The amount you will have paid after you have made all payments as scheduled	The total cost of your purchase on credit, including your down payment of \$149.00
19.95 %	\$198.00	\$1346.00	\$1544.00	\$1693.00

Your Payment Schedule: 16 payments of **\$96.50** each, payable monthly beginning ____/____/____.

Late Charge: If a payment is not paid within 10 days you will pay a late charge of \$5.

Prepayment: If you pay off early, you will be entitled to a refund of the unearned part of the finance charge.

TRUTH IN LENDING DISCLOSURE STATEMENT

Itemization Of Amount Financed/amount credited to your account with us of (a) \$1495.00 Cash Price, Less: (b) \$149.00 Down payment = \$1346.00

Promise to Pay: You promise to pay us the Amount Financed together with finance charges at the Annual Percentage Rate disclosed in the Truth in Lending Disclosure Statement.

Payments: You promise to pay us the monthly payments disclosed in the Truth in Lending Disclosure Statement. You have the option to make your monthly payments either by our charging your credit card or by our debiting your bank account. You will give us a separate authorization if you want either of these options.

Late Charge: You agree to pay a late charge of \$5 on any payment that is more than 10 days late.

Failure to Pay: If you fail to make your payments on time, we can require you to pay your unpaid balance in full. You agree to pay us the fees for attorneys that are not our salaried employees, plus court costs to collect any unpaid balance you owe us, to the extent permitted by law.

Prepayment: You may prepay this Contract at any time. Upon payment in full, you are entitled to a rebate of unearned finance charges figured by the actuarial method, unless otherwise required by law. Partial prepayments will be applied to your last payments in reverse order and will not defer your payments as originally scheduled, unless otherwise required by law.

Returned Check: If your bank returns your check for a payment unpaid, then you agree to pay us a returned check charge of \$5, or such greater amount permitted by law.

NOTICE: ANY HOLDER OF THIS CONSUMER CREDIT CONTRACT IS SUBJECT TO ALL CLAIMS AND DEFENSES WHICH THE DEBTOR COULD ASSERT AGAINST THE SELLER OF GOODS OR SERVICES OBTAINED PURSUANT HERETO OR WITH THE PROCEEDS HEREOF. RECOVERY HEREUNDER BY THE DEBTOR SHALL NOT EXCEED AMOUNTS PAID BY THE DEBTOR HEREUNDER.

Other Rights: We may delay enforcing any of our rights without losing them. We can enforce this Contract against your heirs and legal representatives.

Notice to the Buyer

1. **Do not sign this contract before you read it or if it contains any blank spaces.**
2. **You are entitled to an exact completely filled-in copy of the contract you sign at the time you sign it. Keep this contract to protect your legal rights.**
3. **Under the law, you have the right to pay off in advance the full amount due and under certain conditions to obtain a partial refund of the finance charge. YOU ACKNOWLEDGE RECEIVING AND READING A COMPLETED COPY OF THIS CONTRACT BEFORE SIGNING IT.**

Purchaser Signature: _____ **Date:** ____/____/____ **Seller: COLLEGE PARTNERSHIP, INC.**
Purchaser Signature: _____ **Date:** ____/____/____ **By:** _____
(CP Representative)

Authorization Agreement For Prearranged Payments (Debits) For

Client Name
 College Partnership, Inc. Client # _____
 801 W. Freeway, Suite 800
 Grand Prairie, TX 75051

Stopping drafts does not relieve the undersigned of payment responsibility, and does not cancel the College Partnership Program Agreement

The undersigned hereby authorizes College Partnership, Inc. or its designee hereinafter called the "Company," to initiate debit entries to my (our) account and the Depository named below, hereinafter-called the "Depository" and to debit the same as to such account.

The undersigned has the right to stop payment of a debit entry by notification to Depository at such time as to afford Depository a reasonable opportunity to act on it prior to charging account. After account has been charged, the undersigned has the right to have the amount of the erroneous debit immediately credited to their account by Depository, provided the undersigned sends written notice of such debit entry in error to Depository within fifteen (15) days following issuance of the account statement or forty five (45) days after posting, whichever occurs first.

NAME & ADDRESS OF DEPOSITORY _____ TRANSIT / ABA/ NO. _____

PRINTED NAMES _____ SOCIAL SECURITY NUMBER _____

(CITY) _____

ACCOUNT NUMBER _____ AMOUNT OF DEBIT **\$149.00** _____ TODAY'S DATE _____

DATED AT (CITY) _____ (STATE) _____

Same as above _____ **\$96.50** _____ NEXT PAYMENT DATE _____

THIS _____ DAY OF _____ 20 _____

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF A COPY OF THIS AUTHORIZATION AGREEMENT ON THE DATE WRITTEN ABOVE.

THIS AUTHORITY is to remain in full force and effect until Company and Depository have received written notice from the undersigned of its termination in such time, in such manner as to afford Company and Depository a reasonable opportunity to act on it.

 SIGNATURE _____ SIGNATURE _____