

LASI SECURITY COMPANY, INC. / TRAINING SCHOOL
822 UTICA AVENUE BROOKLYN, NEW YORK 11203
PHONE (718) 498 8660. FAX (718) 498 8680

XI. Enrollment Agreement - Instruction

Last Name	First Name	Middle Name	Social Security Number	Date of Birth. M/D/Y.
(____)	(____)	(____)	(____)	____/____/____
<small>Home Phone Number</small>	<small>Business Phone Number</small>	<small>Ext.</small>	<small>Cell Phone Number</small>	<small>E-mail Address (If Any)</small>

Home Street Address **(NO PO BOX PLEASE)**

City State Zip Code

1)	8-Hour Pre-Assignment Course.	____/____/____	____/____/____	\$35.00	\$ 10.00	\$ 45.00
		<small>Schedule Date</small>	<small>Completed Date.</small>	<small>Tuition cost.</small>	<small>Registration cost.</small>	<small>Total cost. Paid Amount Cash or Check</small>
2)	16-Hour On the Job Training Course.	____/____/____	____/____/____	\$75.00	\$ 10.00	\$ 85.00
		<small>Schedule Date</small>	<small>Completed Date.</small>	<small>Tuition cost.</small>	<small>Registration cost.</small>	<small>Total cost. Paid Amount Cash or Check</small>
3)						
4)	8-Hour Annual In-Service Training Course.	____/____/____	____/____/____	\$35.00	\$ 10.00	\$ 45.00
		<small>Schedule Date</small>	<small>Completed Date.</small>	<small>Tuition cost.</small>	<small>Registration cost.</small>	<small>Total cost. Paid Amount Cash / Check</small>

1. A registration fee must be paid prior to taking any class. Registration fee \$10: This fee will cover materials and administration cost.
2. It is your responsibility to pay all fees due before training (s). After a schedule has been set, it is your responsibility to maintain the schedule. Once the class schedule is accepted, you must make all effort to attend class as schedule, unless you can prove in writing the reasons for the absence or lateness. Acceptable absences are Medical Problems, Final exam (s), unable to obtained baby sitter for child/ children under the age of 13. Legal court dates, travel outside of NYS for emergency purposes, etc.
 - a) If you believe you are running late base on any of the reasons listed above. You must inform the school secretary / a representative of the school administration by phone, (718) - 498-86-60) 4 hours Prior to your class schedule.
 - b) If you believe, you are going to be absent base on any of the reasons listed above. You must informed the school secretary / a representative of the school administration by phone, (718-498-86-60) one (1) day /24 hrs prior to your schedule.
 - c) Base on the merit of the lateness or absence and or the discretion of the School Secretary / a representative of the school administration. An evaluation of your excuse with the document presented will be made to determine your eligibility for another scheduled. Regardless of the excuse (S) if lateness is more than 15 minutes, no class will be attended on the class schedule date in question. You may be reschedule for the next available class schedule.
 - d) If for absent with legitimate reasons, you must produce all proofs, documents, excuses in written before we can determine your eligibility for another class. Under no circumstances will the secretary or a school administration representative will reschedule a student who has not provide in written, prove of absence or who has not call prior to the schedule date in question to be re schedule.
 - e) Regardless of the circumstances, you must present your receipt in order for us to assist you. You may request for a refund of the Tuition not the registration fee. You can only be rescheduling three times, after which all Lasi will not be able to provide you any training.
3. To successfully complete all trainings provided by L. S. G. T. S, you must arrive on time prior to the beginning of class schedule, return from break on time, abide by all class rules, maintain a professional attitude throughout class cession. You must not be a nuisance to any other class participant, or engage in any illegal activities in or outside of classroom. Last but not least, you must obtain a score of (70%) seventy per cent from a pool of 25 multiple choice and or true or false questions.
4. By signing this agreement, I understand that LASI SECURITY GUARD TRAINING SCHOOL does not guaranty me any form of approval from the Department of state Division of Licensing Services, FDNY and or the Division of Criminal Justice Services.
5. I accept to abide by all rules and regulations set by LSGTS and by the department of state Division of Licensing Services relating to security guard training schools. (Security Guard Act of 1992).
6. By signing this agreement, I _____ verify that, I have read, understood, accepted each provision and conditions in the foregoing agreement, _____

Client's Signature REP / Registered by. REP Signature Today's Date.

Certificate (s) /Received Yes or no.	<small>Rep. Name</small>	<small>Initial</small>	<small>Signature</small>	<small>Date</small>	<small>Client's Signature</small>	<small>Initial</small>	<small>Date</small>
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