



**SOUTHERN STATES UNIVERSITY**

**LAS VEGAS**

**CAMPUS**

**ENROLLMENT AGREEMENT**

**FOR**

**GRADUATE CERTIFICATE IN INFORMATION TECHNOLOGY PROGRAM**

**ADMINISTRATIVE OFFICES**

*San Diego – Main Campus*

*1094 Cudahy Place*

*Suite 120*

*San Diego, CA 92110*

*Phone: (619) 298-1829 - Fax: (619) 704-0175*

*Las Vegas*

*2000 South Jones Boulevard*

*Suite 120*

*Las Vegas, NV 89146*

*Phone: (702) 786-3788 - Fax: (619) 704-1002*

[www.ssu.edu](http://www.ssu.edu) - [info@ssu.edu](mailto:info@ssu.edu)

**OVERVIEW**

**Southern States University (SSU)** is an accredited American University, providing quality education since its inception in Southern California in 1983. **SSU** provides quality instruction, while offering excellent prices, which is evident when comparing **SSU** to other U.S. universities.

## **MISSION STATEMENT**

Southern States University empowers a diverse community of students to expand their career opportunities with acquired skills and knowledge, lead fulfilling internal and external lives, and become contributing, edifying members of global communities. Our student-centric approach to education is formulated based on collaborative learning that focuses on promoting critical thinking skills. We expand access to education by creating high-quality, affordable, and innovative pathways that meet the unique needs of each student. Our success is defined by our learners' success.

## **VISION STATEMENT**

The University will bring together a diverse community of students to study in a modern collaborative learning environment to promote critical thinking, ethical academic and business behavior, information literacy, technological proficiency, communication skills, and intercultural engagement with a global perspective. Within a 5-year time horizon (by 2026), SSU will achieve full institutional accreditation at the level of regional accreditation.

**SSU** is:

- Accredited by the Accrediting Council for Independent Colleges and Schools (ACICS).
- Approved by the California Bureau of Private Postsecondary Education (BPPE), which has some of the most rigorous approval standards of any state in the U.S. and is also approved by the State of Nevada Commission for Postsecondary Education.
- Granted "Eligibility" status by the WASC Senior College and University Commission (WSCUC).

**SSU** offers the following programs in Nevada:

- Master of Business Administration (MBA)
- Master of Science in Information Technology (MSIT)
- Bachelor of Science in Trust and Wealth Management (BSTWM)
- Graduate Certificate in Business Administration
- Graduate Certificate in Information Technology

**SSU** has several campuses, in California's most beautiful and glamorous cities, San Diego and Irvine, and one campus in Las Vegas, Nevada. These cities boast large student populations and are ideal places to live and study.

The Las Vegas campus is conveniently located just minutes from the world-famous Las Vegas Strip. A bus stop is easily accessible in front of the school to connect students with Las Vegas' main source of public transportation.

## SSU ACADEMIC PROGRAM IN NEVADA

### Program Information - GCIT

Duration: 3 quarters  
 Total credits: 26  
 Price per credit: \$231.00 x 26= \$6,006.00  
 General Library Fee: \$75.00 per quarter  
 Technology Fee: \$40.00 per payment  
 Non-refundable Student Tuition Recovery \$4.00 Fund (STRF) Fee

A normal academic course load for GCIT students consists of 8 credit hours per term/2 classes, which would result in tuition fee charges of \$1,963.00/term plus general library fees of \$75.00/term and a \$40.00 technology fee/payment on the Quarterly Payment Plan.

Total minimum quarterly payment for GCIT- \$1,963.00  
 Current students are bound by the pricing and terms included in their Enrollment Agreement, which is consistent with the SSU Catalog in effect at the time of initial enrollment.

### GRADUATE CERTIFICATE IN INFORMATION TECHNOLOGY PAYMENT OPTIONS

Payment options		Number of payments	Estimated Total Tuition	Estimated Total Tuition and Fees	What is included
<input type="checkbox"/>	Payment in Full ^#	1 per program	\$6,006.00	\$6,271.00	Tuition = 26 credits x \$231.00 = \$6,006.00 General Library Fee: 3 qtrs. x \$75.00= \$225.00 Technology Fee = \$40.00 Total = \$6,271.00
<input type="checkbox"/>	Quarterly ^#	1 per quarter	\$6,006.00	\$6,351.00	Tuition = 26 credits x \$231.00 = \$6,006.00 General Library Fee = 3 qtrs. x \$75.00= \$225.00 Technology Fee = 3 qtrs. x \$40.00 = \$120.00 Total = \$6,351.00 <i>Ex: 8 credits + Processing = \$1,963.00/quarter</i>
<input type="checkbox"/>	Installments ^#	3 per quarter	\$6,006.00	\$6,591.00	Tuition = 26 credits x \$231.00 = \$6,006.00 General Library Fee = 3 qtrs. x \$75.00 = \$225.00 Technology Fee = 3 qtrs. x 3 installments x \$40.00= \$360.00 Total = \$6,591.00 <i>Ex: 8 credits + Processing = \$681.00/installment</i>

\*\* The Final Payment must be paid in full by the 8<sup>th</sup> week of the student's final quarter.

^ Any outstanding balance with SSU must be paid in full in order to Petition for Graduation.

NOTE: All other fees must be paid at the time of service.

Note: Students wishing to change their GCIT program enrollment from on-site to online (or vice versa), must contact the Registrar to complete a new enrollment agreement. [All Fees Schedule](#)

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**Student Initials**

## SSU ACADEMIC PROGRAM IN NEVADA

### **Graduate Certificate in Information Technology (GCIT)**

- 7 Courses
- 26 credits total

Southern States University's Graduate Certificate in Information Technology is a one-year program eligible for the OPT program that prepares students in the field of information technology. With its emphasis on providing a solid academic and theoretical foundation combined with modern IT skills, the program is structured to ensure its students acquire an in-depth understanding of the IT field, as well as the technical skills required to cope with the ever-increasing complexity of IT issues in the modern world. In consideration of students' tight schedules and responsibilities.

### HEALTH INSURANCE

Health Insurance is mandatory for all F-1 Students. Medical care in the United States can be quite expensive. All full-time students are required to show proof that s/he has medical insurance for issuing their I-20 form.

**It is the student's responsibility to provide SSU with evidence of insurance by the start date of their program.**

For information purposes, here are three possible sources for insurance. Their inclusion here is not meant as a recommendation, and students may select any insurer they choose.

IMG Global - <https://www.imglobal.com/international-student-health-insurance>

Blue Shield of California - [www.blueshieldca.com](http://www.blueshieldca.com)

EHealthInsurance - [www.ehealthinsurance.com](http://www.ehealthinsurance.com)

ISO International Student Health Insurance - [www.isoa.org](http://www.isoa.org)

# APPLICATION FOR ADMISSION – LAS VEGAS

## Student Information

Last Name	First Name	Middle	Male / Female
Date of Birth (MM/DD/YY)	Country of Birth	Email Address (required)	
I-94 Number	Passport Number	Expiration Date	Visa Expiration Date
SEVIS Number			

## Student's Permanent Address in his/her native country

Street	City	State/Province	Zip
Country		Telephone number	

## Student's Permanent Address in the US

Street	City	State/Province	Zip
Telephone number (the US)		Social Security Number (if you have one)	

## Graduate Certificate in Information Technology (GCIT) – 1 year program 26 Credit Hours

How did you hear about Southern States University? \_\_\_\_\_

## Student Educational History:

### High School:

School name: \_\_\_\_\_  
School address: \_\_\_\_\_  
School city, state, zip: \_\_\_\_\_ Number of years completed: \_\_\_\_\_  
Degree / diploma earned: \_\_\_\_\_

### College / University:

School name: \_\_\_\_\_  
School address: \_\_\_\_\_  
School city, state, zip: \_\_\_\_\_ Number of years completed: \_\_\_\_\_  
Degree / diploma earned: \_\_\_\_\_

### Vocational School:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

**Military:**

Branch: \_\_\_\_\_

Rank in Military: \_\_\_\_\_

Total Years of Service: \_\_\_\_\_

Skills/duties: \_\_\_\_\_

Related details: \_\_\_\_\_

**If you are transferring to SSU from another institution, please fill out the information below:**

**Name of the Institution you are transferring from:** \_\_\_\_\_

**Address of the Institution:** \_\_\_\_\_  
Street City State Zip Code

**Reason for transfer:** \_\_\_\_\_

## PROGRAM INFORMATION/ CATALOG ACKNOWLEDGMENT

Start Date of Program Selected: \_\_\_\_\_

Expected End Date of Program Selected: \_\_\_\_\_

\*Check academic calendar for program dates  
<http://www.ssu.edu/academics/academic-calendar/>

### Catalog Signature:

I, \_\_\_\_\_ have received a copy of the version of the catalog that I will be bound to and understand it is a part of the enrollment agreement.

By signing below, I hereby acknowledge that I have reviewed the SSU general Catalog.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Effective Catalog Date: \_\_\_\_\_

**DISCLAIMER: While programs are designed to prepare graduates to pursue employment in the field, or for jobs in related fields, the School cannot guarantee or promise that any student will be placed in any job or placed at all. While the School will assist students with job placement, finding a job is the individual responsibility of the student.**

**I understand that enrollment is conditional, pending receipt of the following:** verification of proficiency in English, enrollment agreement, official transcripts, verification of licenses, resume or curriculum vitae, letters of recommendation and autobiography (if applicable).

By signing below, I hereby acknowledge that I have downloaded and reviewed the SSU **General Catalog**.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Once your application has been approved, you will be notified via electronic mail and asked to complete the remainder of the registration process.

# SOUTHERN STATES UNIVERSITY – LAS VEGAS ENROLLMENT AGREEMENT

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Social Security Number (if you have one) \_\_\_\_\_

Home Address (foreign students - this is the address where your I-20 will be mailed)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Fax Number \_\_\_\_\_

**This agreement is a legally binding instrument when signed by the student and accepted by the University. Your signature on this agreement acknowledges that you have been given reasonable time to read and understand it, and that you have been given: (a) a written statement of the refund policy and (b) a chance to review the *SSU General Catalog*, including a description of the program of study and all material facts concerning the school which are likely to affect your decision to enroll.** The SSU Catalog can be found on SSU's home page at [www.ssu.edu](http://www.ssu.edu). Upon acceptance, a copy of this agreement shall be sent to you for your records.

Southern States University has met the disclosure requirements of Education Code 94810 of the Private and Postsecondary and Vocational Reform Act of January 1, 2002.

## TRANSFERABILITY OF COURSEWORK

The transferability of credits you earn at Southern States University is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the degree or coursework you earn in SSU programs is also at the complete discretion of the institution to which you may seek to transfer. If the credits or degree that you earn at this institution are not accepted at the institution to which you seek to transfer, you may be required to repeat some or all your coursework at that institution. For this reason, you should make certain that your attendance at this institution will meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending SSU to determine if your credits or degree will transfer.

Degree and certificate students may request transfer credit under the school's transfer credit policy as stated in the Catalog. For any transfer credit that is awarded at SSU for previous training or experience, the student will not be asked to pay for the tuition cost of units of the awarded credit.

\_\_\_\_\_  
Student Initials



**NEVADA STUDENTS: Student Refund Policy (State of Nevada Code: NRS 394.449)**

To cancel enrollment and/or obtain a refund, the student must provide written notice to the Office of the Registrar. A refund will be calculated pursuant to State of Nevada regulation NRS 394.449

**The refund policy according to the State of Nevada regulation NRS 394.449 is:**

- 1. Each postsecondary educational institution shall have a policy for refunds which at least provides:**
  - (a) That if the institution has substantially failed to furnish the training program agreed upon in the enrollment agreement, the institution shall refund to a student all the money the student has paid.**
  - (b) That if a student cancels his or her enrollment before the start of the training program, the institution shall refund to the student all the money the student has paid, minus 10 percent of the tuition agreed upon in the enrollment agreement or \$150, whichever is less.**
  - (c) That if a student withdraws or is expelled by the institution after the start of the training program and before the completion of more than 60 percent of the program, the institution shall refund to the student a pro rata amount of the tuition agreed upon in the enrollment agreement, minus 10 percent of the tuition agreed upon in the enrollment agreement or \$150, whichever is less.**
  - (d) That if a student withdraws or is expelled by the institution after completion of more than 60 percent of the training program, the institution is not required to refund the student any money and may charge the student the entire cost of the tuition agreed upon in the enrollment agreement.**
  
- 2. If a refund is owed pursuant to subsection 1, the institution shall pay the refund to the person or entity who paid the tuition within 15 calendar days after the:**
  - (a) Date of cancellation by a student of his or her enrollment.**
  - (b) Date of termination by the institution of the enrollment of a student.**
  - (c) Last day of an authorized leave of absence if a student fails to return after the period of authorized absence; or**
  - (d) Last day of attendance of a student, whichever is applicable.**
  
- 3. Books, educational supplies or equipment for individual use are not included in the policy for refund required by subsection 1, and a separate refund must be paid by the institution to the student if those items were not used by the student. Disputes must be resolved by the Administrator for refunds required by this subsection on a case-by-case basis.**
  
- 4. For the purposes of this section:**
  - (a) The period of a student's attendance must be measured from the first day of instruction as set forth in the enrollment agreement through the student's last day of actual attendance, regardless of absences.**
  - (b) The period of time for a training program is the period set forth in the enrollment agreement.**
  - (c) Tuition must be calculated using the tuition and fees set forth in the enrollment agreement and does not include books, educational supplies or equipment that is listed separately from the tuition and fees.**

\_\_\_\_\_  
Student Initials

## **Nevada Students - Account for Student Indemnification**

The Commission on Postsecondary Education maintains a tuition indemnification fund that may be used to refund students in the event of a school's closure. In order to file a complaint, please contact:

Nevada Commission on Postsecondary Education  
2800 E. St. Louis  
Las Vegas, Nevada 89104  
Telephone: (702) 486-7330  
Fax (702) 486-7340

NRS 394.553 Account for Student Indemnification.

1. The Account for Student Indemnification is hereby created in the State General Fund. The existence of the Account does not create a right in any person to receive money from the Account. The Administrator shall administer the Account in accordance with regulations adopted by the Commission.
2. Except as otherwise limited by subsection 3, the money in the Account may be used to indemnify any student or enrollee who has suffered damage as a result of:
  - (a) The discontinuance of operation of a postsecondary educational institution licensed in this state; or
  - (b) The violation by such an institution of any provision of NRS 394.383 to 394.560, inclusive, or the regulations adopted pursuant thereto.
3. If a student or enrollee is entitled to indemnification from a surety bond pursuant to NRS 394.480, the bond must be used to indemnify the student or enrollee before any money in the Account may be used for indemnification.
4. In addition to the expenditures made for indemnification pursuant to subsection 2, the Administrator may use the money in the Account to pay extraordinary expenses incurred to investigate claims for indemnification or resulting from the discontinuance of the operation of a postsecondary educational institution licensed in this state. Money expended pursuant to this subsection must not exceed, for each institution for which indemnification is made, 15 percent of the total amount expended for indemnification pursuant to subsection 2 or \$10,000, whichever is less.
5. No expenditure may be made from the Account if the expenditure would cause the balance in the Account to fall below \$10,000.
6. Interest and income earned on the money in the Account, after deducting any applicable charges, must be credited to the Account.
7. The money in the Account does not lapse to the State General Fund at the end of any fiscal year.

**Student Initials**

## **TUITION PAYMENT PLANS**

### **Student Loans**

If the student obtains a loan to pay for an educational program, the student will have the responsibility to repay the full amount of the loan plus interest, less the amount of any refund. **Ed. Code §94911 (f)**

If the student is eligible for a loan guaranteed by the federal or state government and the student defaults on the loan, both of the following may occur:

(1) The federal or state government or a loan guarantee agency may take action against the student, including applying any income tax refund to which the person is entitled to reduce the balance owed on the loan. (2) The student may not be eligible for any other federal student financial aid at another institution or other government assistance until the loan is repaid. **Ed. Code §94911 (g)(1)(2)**

**NOTICE:** YOU MAY ASSERT AGAINST THE HOLDER OF THE PROMISSORY NOTE YOU SIGNED IN ORDER TO FINANCE THE COST OF THE EDUCATIONAL PROGRAM ALL OF THE CLAIMS AND DEFENSES THAT YOU COULD ASSERT AGAINST THIS INSTITUTION, UP TO THE AMOUNT YOU HAVE ALREADY PAID UNDER THE PROMISSORY NOTE.

For any amount not covered by loans, SSU provides payment plan options to students as detailed below.

**PAYMENT METHODS**

**Credit Card:**



Name on Card \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV Number \_\_\_\_\_

Billing Address of the Card \_\_\_\_\_

Phone Number of Cardholder \_\_\_\_\_

**Check/Money Order:**

**E check**

Please make check payable to Southern States University, 1094 Cudahy Pl, Suite 120 San Diego, CA 92110; Phone: (619) 298-1829; Fax: (619) 704-0175. (Note: Any check returned unpaid by the bank will incur a \$30.00 fee)

**Bank Wire Transfer:**

The following is the information requested concerning your wire transfer:

Bank Name: Wells Fargo Bank  
Branch: San Diego - CA

Account Number: 7655659501  
Routing Number: 121000248  
SWIFT Code: WFBIUS6S

Wire Beneficiary: Southern States University  
1094 Cudahy Pl, Suite 120 San Diego, CA 92110

(Note: Wells Fargo Bank charges \$30.00 for the wire transfer fee. Be sure to include this amount to the total fee).

**Acceptance of Enrollment Agreement**

I acknowledge that I am obligated to pay for the program of instruction selected, and for all other services and materials furnished or made available by the school, including any charges made by the school for books and supplies, and any other fees and expenses that I incur upon enrollment. I understand that I will not be able to graduate or receive my diploma prior to full payment of all fees and charges. If the payment plan extends beyond the program completion date, I agree that I am obligated to pay all fees and charges documented on the Fees and Charges page of this agreement, subject to the refund policy which is also documented in this agreement.

A Nevada student who wishes to file a complaint about this institution, may contact the State of Nevada Commission on Postsecondary Education at 8778 South Maryland Parkway Suite 115, Las Vegas, NV 89123; Telephone: (702) 486-7330; Fax (708) 486-7340.

Prior to signing this enrollment agreement, you must be given a catalog or brochure, which you are encouraged to review prior to signing this agreement. These documents contain important policies and performance data for this institution.

I certify that I have received the current Catalog.

**I am aware that the current SSU General Catalog is located on the SSU's website, [www.ssu.edu](http://www.ssu.edu), and is readily accessible to all students and the general public and that the information contained in the current catalog is part of this enrollment agreement. Furthermore, I acknowledge that the current catalog is subject to change throughout my program of study and any changes will apply to my program.**

\_\_\_\_\_  
Student Initials



**SOUTHERN STATES**  
UNIVERSITY

**TOTAL CHARGES FOR THE CURRENT PERIOD OF ATTENDANCE:** \$ \_\_\_\_\_  
*(chosen payment plan)*

**ESTIMATED TOTAL CHARGES FOR THE ENTIRE EDUCATIONAL PROGRAM:** \$ \_\_\_\_\_  
*(total cost of your program)*

**TOTAL CHARGES STUDENT IS OBLIGATED TO PAY UPON ENROLLMENT:** \$ \_\_\_\_\_  
*(enrollment fees)*

I understand that this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution's cancellation and refund policies have been clearly explained to me.

I, \_\_\_\_\_, declare the information I have disclosed herein is both true and accurate.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Director of Admissions: \_\_\_\_\_ Date: \_\_\_\_\_

**Location of Instruction**

**Las Vegas:** 2000 South Jones Boulevard  
Suite 120  
Las Vegas, NV 89146  
Phone: (702) 786-3788  
Fax: (619) 704-1002  
Email: [lvadmissions@ssu.edu](mailto:lvadmissions@ssu.edu)

\_\_\_\_\_  
**Student Initials**