



**CONLIN-HALLISEY  
TRAVEL SCHOOL, INC.**

A Travel Career  
Development Center

www.travelstudent.com

## APPLICATION FOR INTERNET CLASSES

**Instructions:** Please state all information clearly and accurately. Information will be held in strict confidence and used only for the purpose of determining admittance.

**\*\*\*Please include application fee of \$40.00\*\*\***

~ PLEASE PRINT ~

SESSION	Check class in which you would like to enroll		Travel Career Development	\$1,599.00
			Independent Agent	\$1,099.00
			SABRE Automated Reservations	\$909.00
			Specialist Courses	\$135.00 each
			Event & Meeting Planning	\$1,099.00
			Individual Courses (Please List)	\$135.00 each
PERSONAL DATA	Name	First	Middle	Last
	Date of Birth	(Month/Day/Year)                    /                    /		
	Address	Street		
		City	State	ZIP
	Phone	(                    )		
	E-mail			
EDUCATION	Highest Level of Education	School		
		City/State		
		Years Completed		
		Graduation Date		
		Degree		
GENERAL INFORMATION	1. I learned of CHTS through:			
	2. Referred by (Name & Address):			
	3. How long have you been interested in this career?			



3270 Washtenaw Ave.  
Ann Arbor, MI 48104

734 677-1562  
fax: 734 677-1428

## Payment

Payment in full must accompany the application.

## Refund Policy

**Five Day Cancellation** – All monies paid for by an applicant will be refunded if requested in writing within five days after signing an enrollment agreement and making payment for the course, less the application fee of \$50.00, provided no courses have been started.

**Course Beginnings** – Once an individual on-line course has been started, there is no refund for that course. Any courses that have not been started are fully refundable less a \$50.00 administrative fee. A request for refund must be sent in writing via letter or E-mail. Used courses within a Certificate Course Program will be charged at the regular individual course rate.

**Upon Cancellation** – all money due the student shall be refunded within 30 days less the \$50.00 administrative fee. This refund policy applies to all terminations, for whatever reason, by either party.

## School Rules

It is unacceptable for any Conlin-Hallissey Travel School student to be found cheating.

If this should occur, the student will:

1<sup>st</sup> time – Receive a “0” for the assignment.

2<sup>nd</sup> time – Be automatically dismissed from the Program.

The student will lose access to all programs and NO refund will be given.

## Graduation Requirement

Each student is required to complete each entire Program with a grade point average of C or better in order to be eligible to receive a Certificate of Completion. No credit will be given for prior educational or work experience.

## Enrollment Agreement

I agree to be personally responsible to pay the entire amount of tuition for the program in which I am enrolled, as of the date I sign this agreement.

I agree that the contents of all the written materials, excluding textbooks, are supplied to me as a result of my enrollment in Conlin-Hallissey Travel School and are the property of Conlin-Hallissey Travel School. I may use these materials myself, but I will not sell or give them to anyone who would use them in competition with Conlin-Hallissey Travel School and I will not use them myself in competition with Conlin-Hallissey Travel School.

I agree to comply with all school rules.

I agree that I may be expelled from Conlin-Hallissey Travel School if I do not comply with all school rules as stated.

I state that all of the foregoing information is true and correct to the best of my knowledge. I understand that it will be held in strict confidence and will be used only for determining the degree to which I may benefit from this training. Enclosed please find my check for full course payment, made payable to Conlin-Hallissey Travel School, Inc.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Amount Enclosed \_\_\_\_\_



**Conlin-Hallissey Travel School**  
3270 Washtenaw Avenue  
Ann Arbor, Michigan 48104  
Phone: 734-677-1562

## CARDHOLDER AUTHORIZATION FORM

I, \_\_\_\_\_

authorize **Conlin-Hallissey Travel School**

to charge the amount of \$ \_\_\_\_\_

for the following services: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

to my:  Visa,  MasterCard,  Amex,  Diners/Enroute,  Discover

Card#: \_\_\_\_\_ Security Code: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Name on card (please print): \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City/State/Prov: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I/we are aware of any cancellation policies and agree not to dispute or attempt to Chargeback any of the above signed for and acknowledged charges: \_\_\_\_\_

(Cardholder's initials)