COMMONLY ASKED QUESTIONS ABOUT ESTHETICIANS AND ESTHETICIAN TRAINING

What is an esthetician and what do they do?
An esthetician is a skin care specialist who is licensed to perform facials, waxing, and makeup artistry services. Estheticians can be found working in various environments including salons; day and destination spas; dermatology and plastic surgery practices; and retail or educational environments.

How long does it take?
The Elizabeth Grady School offers esthetics programs that are 300 and 600 hours in a variety of flexible schedules. A 300 hour full-time day program can take as little as ten weeks to complete whereas a 600 hour part-time evening program requires thirteen months. Students attend classes 12, 20, or 30 hours per week.

What is the difference between the 300 hour and 600 hour programs?
The state of Massachusetts requires a minimum of 300 hours to become licensed therefore the school is required to allow students to complete at 300 hours if they choose. However, currently 90% of the United States requires 600 or more hours to become licensed. Additionally, today’s marketplace requires estheticians entering the profession have knowledge in the most up-to-date techniques and products such as light chemical peeling and microdermabrasion which require additional training well above 300 hours. Therefore, we recommend that students carefully weigh their options during the enrollment process. Career advisement is available during the admissions process to help determine which program is most appropriate for you and your professional goals.

How much does it cost?
The 300 Hour Esthetician program cost is $6,800.00 and includes textbooks, uniforms, and all products and supplies. The 600 Hour Esthetician program cost is $9,500.00 and includes textbooks, uniforms, and all products and supplies. Students can take advantage of saving money by enrolling early. We also offer discounts to certified professionals in complimentary fields of study such as beauty and healthcare. Please inquire during your admissions interview.

What’s available for financial aid?
300 HOURS: No financial aid is available for 300 hours.

600 HOURS: Independent students could qualify for up to $6333.00 in federal loans and up to $3876.00 in federal Pell grants. Dependent students can qualify for up to $3666.00 in federal loans, up to $3876.00 in federal Pell grants, and parent PLUS loans are also available and are credit based loans available to parents of dependent students.

You can find detailed information about Financial Aid online at www.elizabethgrady.edu. Click on Prospective Students on the task bar, and scroll down to Financial Planning. Additionally, Naida Greene, Financial Aid Administrator, can be reached at 781-960-0114 and will be happy to assist you with any questions.

Is more education available?
Advanced and continuing education is available to licensed estheticians and students enrolled in the programs at the Elizabeth Grady School. Numerous programs are available throughout the year including, but not limited to: Aromatherapy, Advanced treatment of Acne, Advanced Facial Massage, Exfoliation and Chemical Peeling, Eyelash Extensions, Microdermabrasion, Reiki, and more.
STEPS TO ENROLL IN AN ESTHETICIAN PROGRAM AT THE ELIZABETH GRADY SCHOOL

1. _____ Tour and Interview: Call 781-960-0123 to schedule a time.

The required enrollment documents listed below, numbers 2, 3, 5, & 6 are included on the following pages. You may print, complete, and bring with you to your interview or the school can provide you hard copies at the time of your interview. You also may mail, fax, or scan and email to the school.

Mailing Address: Elizabeth Grady School, 222 Boston Avenue, Medford, MA 02155 att: Admissions

Fax Number: 781-391-4772

Email: admissions@elizabethgrady.com

2. _____ Application for Enrollment.

3. _____ Enrollment Agreement Contract.

4. _____ Deposit: Submit your Application, Contract, and Deposit of $500.00 to reserve your seat. Students who are fully loan and grant eligible may receive a reduction in the amount of the deposit. Please inquire with Financial Aid to learn more. The deposit may be paid by check, money order, Mastercard, or Visa. Credit card payment can be made over the phone by contacting Mary at 781-960-0129.

5. _____ Questions to Consider: Read and sign the Questions to Consider document. Please ask an Admissions representative if you have any questions regarding the considerations listed.

6. _____ Medical Documentation: Schedule an appointment with your physician for TB (tuberculosis) test. This test can be performed by your general practitioner or at a walk-in clinic such as the CVS Minute Clinic. Submit results prior to the first day of class.

7. _____ Photo Identification: Provide a photocopy of your state issued driver’s license, I.D., or passport. Further identification to support citizenship or eligibility may be required. A valid Alien Registration Card is required for all eligible non-citizens and an M-1 Visa is required for all ineligible non-citizens.

8. _____ Proof of Education: Provide a copy of high school diploma, college diploma, GED, or official transcripts. If you were educated in another country, please make sure that your diploma is translated and notarized. If you are unable to locate your diploma, please contact your high school to obtain and official copy of your transcript, which must include the school seal and be unopened or mailed directly from the school to Elizabeth Grady.

9. _____ Complementary Field of Study Discounts: If you retain a license or certificate in the healing arts, wellness, or beauty fields (ie: CAN, LPN, RN, MT, electrologist, cosmetologist, etc…) please provide proof of education and/or license to receive a $250.00 tuition discount.

10. _____ Pre-enrollment Checklist: Acknowledge the receipt of all of the vital information provided by the school that you need to know to make an informed decision about going to school.
ELIZABETH GRADY
SCHOOL OF ESTHETICS AND MASSAGE THERAPY

ESTHETICS ENROLLMENT APPLICATION

Name:____________________________________ Social Security No. Last four digits: __________

Date of Birth:_________________Phone: Home_________ Work__________________________

Complete Street Address/City/State/Zip:____________________________________________________

Email Address:_______________________________ Cell Phone Number:________________________

U.S Citizenship Status (Check one and list ID number if applicable):
_____Citizen/National  ___ Eligible non-citizen  Alien I.D. # ____________________________ Exp.________

Enrolling in:
_____300 Hour Day M-F  9:00 A.M.- 4:00 P.M.
_____600 Hour Day M-F  9:00 A.M.- 4:00 P.M.
_____300 Hour Day M-F  9:30 A.M. – 1:30 PM
_____600 Hour Day M-F  9:30 A.M. – 1:30 PM
_____300 Hour Eve/Sat M/T 6:30-9:30 and Sat 9-3:30
_____600 Hour Eve/Sat M/T 6:30-9:30 and Sat 9-3:30

Program Start Date: ____________________ Program End Date: _______________________

Financial:
Are you applying for Financial Aid (Student Loans and/or Grants)?   Yes_____ No______
Would you like a payment plan on the school balance?   Yes_____ No______

Uniform size:
Top (XS, S, M, L, XL)__________Pant Size (XS, S, M, L, XL)_____________ Height _________

EDUCATION

___________________________________________________ ___________________________
High School    Address    Year Graduated

___________________________________________________ ___________________________
College/Other Education  Address    Year Graduated
EMPLOYMENT

Present Employer  Address  phone  From/To

MEDICAL INFORMATION

1. IMPORTANT: List all allergies, sight or hearing problems, learning disabilities, medical conditions including pregnancy, and all prescription medications.

2. Emergency Contact____________________________________________

   Name  Address  Phone (H/W)

ENROLLMENT APPLICATION QUESTIONS

1. Can you devote adequate time to your studies if you are accepted?  Yes  No

2. How did you first learn or become interested in Elizabeth Grady School of Esthetics?

3. What most interests you about a career in the field of Esthetics? (Minimum 20 words)

4. In your own handwriting, please describe below why you wish to be accepted to the Elizabeth Grady School of Esthetics. (Minimum 20 words)
Please circle the following:

- Have you been informed that you must fully participate in all areas of practical and make-up artistry including facial and body treatments, waxing services and make-up application?
  
  Yes  No

- Have you been informed that attendance is extremely important to the success of your program, that you cannot miss more than 5% of the time you are enrolled, and you must make up any time missed?
  
  Yes  No

- Have you received in the mail or during your tour, the information packet containing consumer information on the field of esthetics?
  
  Yes  No

- Have you been informed that you will be required to report to the Elizabeth Grady School of Esthetics the name of the salon/spa/company that hires you as an esthetician or make up artist following graduation?
  
  Yes  No

Please sign and date this enrollment application and submit with your tuition deposit and Enrollment Agreement Contract. Additionally, the following items are requirements for admission and must be submitted prior to your first day of class:

- Copy of High School or College Diploma, GED, or Official Transcript
- Photo ID (State Government issued I.D., Driver’s License, or Passport) with proof of age
- Medical release documentation (TB results)
- Proof of citizenship or Student Visa if non-citizen
- IPEDS questionnaire

Student Signature: ___________________________ Date: ___________________________

Parent/Guardian (if applicant is under 18): ___________________________ Date: ___________________________

School Administrator: ___________________________ Date: ___________________________

Revised 1/2015
ENROLLMENT AGREEMENT CONTRACT- Esthetics Programs

Name:___________________________________________  Program/Course Name:  Esthetics
Primary telephone:_________________________________  Other:_______________________
Email: ____________________________________________ ____________________________
Social Security Number:____________________ Date of Birth:_________________________

**PROGRAMS**

**300 Hour Esthetics Programs:**
- [ ] Full Time Day (9-4)  10 wks required  Hours per week- 30
- [ ] Full Time Day (9:30-1:30)  15 wks required  Hours per week- 20
- [ ] Part Time Eve (300 Hour)  25 wks required  Hours per week- 12

**600 Hour Esthetics Programs:**
- [ ] Full Time Day (9-4)  20 wks required  Hours per week- 30
- [ ] Full Time Day (9:30-1:30)  30 wks required  Hours per week- 20
- [ ] Part Time Eve (600 Hour)  50 wks required  Hours per week- 12

Course Start Date_______________________   End Date ____________________  
Period beyond which late registration will not be accepted__________________  

Tuition Fee__________ Other Charges__________     Total Charges_________  

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<tr>
<th>Applicable Discounts:</th>
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<tr>
<td>$250.00 Paid in Full</td>
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<tr>
<td>$250.00 Complimentary Field of Study Certificate/License</td>
<td></td>
</tr>
<tr>
<td>$250.00 Early Enrollment</td>
<td></td>
</tr>
<tr>
<td>Multiple/Dual Program Enrollment</td>
<td>Other specify:</td>
</tr>
<tr>
<td>Total Tuition Discount</td>
<td>School Rep. Initials</td>
</tr>
</tbody>
</table>

Method of Payment (Check all that apply):
- _____Financial Aid (Loans and/or Grants)
- _____Personal Check
- _____Business Check
- _____Money Order
- _____Cash
- _____Mastercard or Visa
- _____Other (ie: Veteran’s Benefits, MA Rehab, etc…) Please Specify:____________

Payment Terms:
- _____Payment Plan
- _____Payment in Full
- _____Other- Please Specify:____________

Elizabeth Grady School of Esthetics and Massage Therapy- Esthetics Program Enrollment Agreement Contract  1/4
8/8/2016
**BREAKDOWN OF COSTS**

**300 Hour Esthetic Programs**

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<tbody>
<tr>
<td>TOTAL COST:</td>
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<tr>
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<tr>
<td>$6300.00 Balance*</td>
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<tr>
<td>TUITION:</td>
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<tr>
<td>UNIFORMS:</td>
<td>$150.00</td>
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<tr>
<td>TEXT MATERIALS:</td>
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<tr>
<td>SKIN CARE PRODUCTS, MAKEUP, &amp; SUPPLIES:</td>
<td>$625.00</td>
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<tr>
<td>ADMINISTRATIVE FEE:</td>
<td>$50.00</td>
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**600 Hour Esthetic Programs**

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<tr>
<td>$ 500.00 Deposit due upon enrollment</td>
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<td>$9000.00 Balance*</td>
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<td>SKIN CARE PRODUCTS, MAKEUP, &amp; SUPPLIES:</td>
<td>$1000.00</td>
</tr>
<tr>
<td>ADMINISTRATIVE FEE:</td>
<td>$50.00</td>
</tr>
</tbody>
</table>

*Weekly and Monthly Payment plans are available for all esthetic and massage therapy programs. Full tuition payment must be received before class end date to graduate.

**REFUND POLICY**

*(Numbers 1-9 as per M.G.L.C. 255 Sec. 13K)*

1. You may terminate this agreement at any time.

2. If you terminate this agreement within five days you will receive a refund of all monies paid, provided that you have not commenced the program.

3. If you subsequently terminate this agreement prior to the commencement of the program, you will receive a refund of all monies paid, less the actual reasonable administrative costs described in paragraph 7.

4. If you terminate this agreement during the first quarter of the program, you will receive a refund of at least seventy-five per cent of the tuition, less the actual reasonable administrative costs described in paragraph 7.

5. If you terminate this agreement during the second quarter of the program, you will receive a refund of at least fifty per cent of the tuition, less the actual reasonable administrative costs described in paragraph 7.

6. If you terminate this agreement during the third quarter of the program, you will receive a refund of at least twenty-five per cent of the tuition, less the actual reasonable administrative costs described in paragraph 7.

7. If you terminate this agreement after the initial five day period, you will be responsible for actual reasonable administrative costs incurred by the school to enroll you and to process your application, which administrative costs shall not exceed fifty dollars or five per cent of the contract price, whichever is less. A list of such administrative costs is attached hereto and made a part of this agreement.

8. If you wish to terminate this agreement, you must inform the school in writing of your termination, which will become effective on the day such writing is mailed.
9. The school is not obligated to provide any refund if you terminate this agreement during the fourth quarter of the program.

10. Students receiving assistance from Federal Title IV programs may be subject to a special refund or return to Title IV requirements as of 10/07/2000 per Federal Regulations, provided they have completed less than 60% of the payment period for which aid was or could have been disbursed. Federal regulations require the return of Title IV funds in the following order if applicable; Unsubsidized loans, Subsidized loans, Perkins loans, Plus Loans, Pell Grants, SEOG, or other Title IV.

11. Enrollment time is defined as the time elapsed between the actual starting dates of the student's last day of physical attendance in the school. Any monies due to the student shall be refunded within fourteen (14) days of formal cancellation by the student as in Section #3 or formal cancellation by the School, which shall occur no more than thirty (30) days from the date of withdrawal or shall be the earlier of the date of expiration of the leave of absence or the date the student notifies the institution that the student will not be returning.

12. Termination by the Elizabeth Grady School: Notwithstanding the forgoing, if this contract is terminated by the School due to willful misconduct and/or the inability to maintain satisfactory progress in accordance to the schools policies and procedures, the student will be refunded monies according to the schools refund policy.

13. Once a student begins classes, books and equipment become property of the student. If the student terminates enrollment, books and equipment become non-refundable.

14. In cases of mitigating circumstances such as prolonged illness or accident, death in the family, or other situations that make it impossible to complete the course, the School shall make a settlement, which is reasonable and fair to both.

15. If a course is cancelled subsequent to a student's enrollment, the School shall at its option; provide a refund of all monies paid or provide completion of the course.

16. If the School is permanently closed or no longer offering instruction after a student has enrolled, the student shall be entitled to a pro-rated refund of tuition.

17. The School will dismiss any student who has undocumented absences for thirty (30) consecutive days.

18. A student who is on a leave of absence and who does not return to School by their scheduled return date will be dismissed from the School.

19. There will be a $25.00 fee for missed tests to cover staffing costs to makeup examinations outside of regularly scheduled class time.

20. There will be a $20.00/hour charge for instruction past the contracted ending date listed on page 1 of this agreement.
ADMISSION REQUIREMENTS
All Admission requirements must be received by the by the first day of the start of your enrollment date found on page 1 of this agreement. Inability to meet this requirement may delay your enrollment start date.

PLACEMENT
The Elizabeth Grady School does not guarantee job placement but will assist in resume preparation, job interviewing skills and job placement. The Elizabeth Grady School maintains an updated job listing for graduates and alumni.

ADDITIONAL EXPENSES
In addition to the items included in the cost of the program, esthetics students will be expected to incur additional expense for shoes, note-taking supplies, combination padlock, tweezers, and costs associated with state examination and licensing.

ATTENDENCE
A satisfactory attendance record is a course completion requirement. Any student missing more than 5% of classes may be placed on probationary status and any subsequent absence can result in dismissal from the school.

GRADUATION REQUIREMENTS
To fulfill graduation requirements, students must complete all contracted hours in their program as well as maintain a minimum level of proficiency of 70% in all required courses as applicable to the program of study. All tuition balances must be paid in full for all programs.

By affixing your signature below you have acknowledged that you have read and received a copy of this contract.

STUDENTS SIGNATURE______________________________  DATE___________

PARENT/GUARDIAN SIGNATURE (If applicable)______________________________  DATE___________

SCHOOL OFFICIALS SIGNATURE__________________________  DATE___________

For School Use Only:
___________ Date of Interview    School Administrator Signature:_____________
___________ Date of Acceptance    School Administrator Signature:_____________

Elizabeth Grady School of Esthetics and Massage Therapy
222 Boston Avenue
Medford, MA 02155
Phone: 781-960-0123 Fax: 781-391-4772
www.elizabethgrady.edu

Elizabeth Grady School of Esthetics and Massage Therapy- Esthetics Program Enrollment Agreement Contract  4/4
8/8/16
QUESTIONS FOR ESTHETICIAN STUDENTS TO CONSIDER

As the leader in skin care salons, Elizabeth Grady understands the industry very well. The profession offers both personal and professional rewards with a variety of career options. We have compiled a list of questions one should consider important in making a decision to enroll in an esthetics program at the Elizabeth Grady School. Please sign the bottom line to indicate you have read, understand and accept each question.

In the School:
1. Are you comfortable being touched by another student or teacher?
2. Are you open to wearing a professional make up?
3. Are you open to not using tanning beds and not excessively tanning?
4. Do you have good physical dexterity for massage, waxing and make-up application?
5. Are you willing to grow your hair on the brows, upper lip, underarms, bikini and legs for training in waxing techniques?
6. Attendance is key to learning, supporting your classroom community, and a prerequisite for successful completion of your program. It is also a requirement for receiving financial aid disbursements. Are you willing to be in punctual and in attendance on a daily basis?
7. Are you willing to remove visible body piercing, with the exception of single pierced ears? The Elizabeth Grady School requires that no visible piercings be worn to maintain a level of professionalism and prevent injury during massage procedures.
8. Are you willing to cut your fingernails to fingertip length? Long nails can scratch and injure clients. Massage students are required to keep their nails short at all times.
9. Do you understand that placement is not guaranteed? Although the school maintains an ongoing list of employers and provides a strong business development module within the program, it is ultimately the student’s responsibility to lead their job search with the support of the school.
10. Are you proficient with speaking, writing and reading English? All programs are taught in English. Many ESL students have successfully completed our programs, however if you have a concern in this area please let us know so that we can help set you up for success.

In the industry:
1. Do you enjoy working with people?
2. Are you a good listener and communicator?
3. Do you like to be helpful to people?
4. Are you interested in health, beauty, and wellness?
5. Do you enjoy working with your hands?
6. Do you find it gratifying helping others feel better about themselves?
7. Are you capable of not smoking during working hours?
8. Are you open to selling products and services as a trained esthetician?
9. Do you enjoy a fast past environment and understand the importance of good time management? Can you adapt to changing environments and can you remain calm in the midst of that change?
10. Are you able to stand or sit for long periods?
11. Do you have good mobility of your upper and lower limbs?
12. Are you available to work on weekends?
13. Have you ever been convicted of a felony? This could affect your ability to become licensed. If so, please contact the Board of Cosmetology for more information.

By signing below you acknowledge you have read the above questions to consider and agree that “yes” you are able to comply with the above educational and industry requirements to enter the field of study and profession. Should you have any questions please speak with an Admissions staff member.

Student’s Signature:_______________________________ Date____________________
Print Name:______________________ Program: Day/Evening Start Date:_______________
Department of Education Annual Institutional Participation Educational Data Survey (IPEDS)

Each year the Elizabeth Grady School is required to provide the US Department of Education with a summary of miscellaneous data (age, sex, marital status, etc…) called an IPEDS report. Please fill out the following information. This information will not be used for any other purpose other than this report.

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<td>o Widowed</td>
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<td>o 10,000.00-19,999.00</td>
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<td></td>
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<tr>
<td></td>
<td>o 30,000.00&gt;</td>
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<tr>
<td>Ethnicity</td>
<td>o American Indian or Alaskan Native</td>
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<td></td>
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<td></td>
<td>o Bachelor Dress</td>
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<td></td>
<td>o Master's Degree</td>
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Additionally, please note that a school representative will follow up with you in the year following graduation to obtain licensing and employment information. All graduates are required to respond to the graduate survey. Please join our Facebook Group Elizabeth Grady Schools of Esthetics and Massage Therapy and, if you have not done so already, join our e-mailing list on line at www.elizabethgrady.edu to help keep abreast of advanced training, employment opportunities, and general announcements.

Elizabeth Grady School of Esthetics and Massage Therapy- IPEDS student survey
Pre-enrollment Checklist

Student Name

Program

Date

I have received written information and/or accessed this information electronically via email or the school website concerning the following topics prior to receiving a copy of my signed enrollment agreement contract.

- School Catalog
- School’s Graduation Rate
- School’s Licensure Rate
- School’s Job Placement Rate
- Requirements for Licensure
- Prerequisites for Employment
- Satisfactory Academic Progress Policy/School Policy Handbook
- Copy of Signed Enrollment Agreement Contract

Student Signature: ___________________________ Date: _______________________

Admissions Official: ____________________________

Elizabeth Grady School of Esthetics and Massage Therapy
222 Boston Avenue
Medford, MA 02155
Phone 1-800-FACIALS Fax 781-391-4772
www.elizabethgrady.edu
Dear Student:

The Elizabeth Grady School requires all students to be tested for tuberculosis prior to beginning the program. This test is an intra-dermal antibody test that requires the individual being tested to return to the medical facility 48-72 hours to be read after being planted. Test results must be dated within one year of beginning your program. If you have had a TB test in excess of one year of your start date, you must have another.

We are dedicated to promoting a healthy environment for our students, staff and clients. Testing can be performed by your regular physician or at any neighborhood clinic or hospital. Should you test positive, you are required to undergo proper treatment as prescribed by a medical doctor and/or have the results of a chest x ray with your physician stating you are able to fully participate in the program without risk to others.

Please have your physician complete the documentation below or have them supply their own documentation of your test results. Submit results to the admissions department before beginning the program. This is a requirement for admission to our program.

Sincerely,

Cate Tool
School Director

This is to certify that ___________________________ , Date of Birth_______________ has been tested for:

- Tuberculosis    (Admissions Requirement for students attending esthetician or massage programs)

Please circle result:     Positive         Negative

If positive, course of treatment:______________________________________________________________

Begin and end dates of treatment:______________________________________________________________

______________________________________    __________
Physician’s Signature               Date

______________________________________
Physician’s Name Printed

Name of Medical Practice, Address and Telephone number

Add’l notes: