**Attachment 10.2**

# Application for Admission & Enrollment Agreement (Contract)

## American International University of Management & Technology

5 Marysville
Irvine, CA 92602-1063
U.S.A.

In accordance with California Code Section 94810, any questions or problems concerning this University which have not been satisfactorily answered or resolved by the University should be directed to the Council for Private Post-secondary and Vocational Education, P.O. box 98018, Sacramento, California 95814-6200

Please type or print:

Check one box:
Bachelor's Degree: Γ
Master's Degree: Γ
Doctoral Degree:
Ph.D Γ Ed.D Γ
Major Field: _____

**Personal Data**

N a m e :

_____
Last First Middle

Check the appropriate box for your preferred mailing address and complete all information:

Γ Home Address _____
Street & Number Apartment, if any

_____
City State Zip Code Country

_____
Telephone Number Fax/E-Mail

Γ Business Address _____
Street & Number

_____
City State Zip Code Country

_____
Telephone Number Fax/E-Mail

Age & Date of Birth _____
Month/Date/Year

___

City/State/Country Country of Current Citizenship

Social Security Number _____

**Educational Background**

List in order the names and locations of all colleges and universities attended. Please include a copy of the transcript from each institution listed. Following acceptance and prior to graduation, please submit an official transcript to the Registrar of this University.

| Institution | Location | Date Attended | Degree Granted | Major | GPA |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Other Academic Awards/Honors:

_____

_____

_____

_____

_____

**Employment History/Professional Experience**

Please be concise. You may include a copy of your resume, if you wish. Start with your current/last position first:

| Company/Institution | Position | Period | |
|---|---|---|---|
| | | from | to |
| | | | |
| | | | |
| | | | |
| | | | |

Military service, if any:

_____

_____

_____

**Assessment for Life Work/Experiential Learning Credits**

The University allows a reasonable number of experiential credits to be counted towards any degree program. Credits are permitted on the basis of equivalency in a specific program of study and at an appropriate level relative to University's courses. This background must be documented and justified by the applicant. Experience that qualifies for consideration includes, but is not limited to:

Continuing education courses, seminars, symposia, project performance/management, publications, etc. The higher the level of supervision, the higher the consideration for credits. Please use additional sheets, if necessary.

_____

_____

_____

_____

I understand that the current 2002-2004 AIUMT Catalog is incorporated herein by reference and is made a part of this agreement. This Admission Application is accurate and complete to the best of my knowledge and belief. Please indicate your preferred Payment Plan Option by checking the appropriate box below. 2002-2004 Tuition and Fee Schedule is attached:

Γ Option A (Full Payment):
..... $.....

Γ Option B (Monthly Payment Basis):
..... $ ...../month for ..... months

Γ Option C (Course-by-course Payment Basis)
..... $ ...../course

Please mail the Application along with the non-refundable $100.00 Registration fee to:

**American International University of Management & Technology**
5 Marysville
Irvine, CA 92602-1063
U.S.A.
Phone: (714) 731-7790 h Fax: (714) 731-6295

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. Non-California resident students should note that they are not eligible for protection under and recovery from the Student tuition Recovery Fund.

All instructions will be provided via distance-learning mode.

The name and description of the Program of instruction, including the total number of credits required to complete the program of instruction are presented in the "Study Plan" which is an integral part of this Enrollment Agreement (attached).

This Agreement is legally binding instrument when signed by the student and accepted by AIUMT.

"BUYER'S RIGHT TO CANCEL". Please note that the student has the right to cancel this Enrollment Agreement at any time and obtain an appropriate refund in accordance with AIUMT's stipulated rules and regulations by simply notifying in writing to AIUMT Registrar at the above address if he or she elects to cancel the Enrollment Agreement.

_____ _____

Signature of Applicant Date

We hereby certify that AIUMT has met all disclosure requirements.

_____

Signature of Registrar

For Official Use Only
Please leave this page blank.