

**The AHW Barber Academy**

**3822 N 9th Ave**

**Pensacola, FL 32503**

**850-692-9298**

**PRE-ENROLLMENT CHECKLIST**

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|  | |
| **Student Name** | |
|  |  |
| **Program** | **Date** |

I have received written information concerning the following topics prior to signing my enrollment agreement:

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| --- | --- |
|  | **School Catalog** |
|  | **School’s Graduation Rate** |
|  | **School’s Licensure Rate** |
|  | **School’s Job Placement Rate** |
|  | **Certification or Licensure Requirements** |
|  | **State-required Information** |
|  | **Pre-Requisites for Employment** |
|  | **Satisfactory Academic Progress Policy** |

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| --- | --- |
|  |  |
| **Student Signature** | **Date** |