

## **Energy Medicine University Signature Form**

Please read, sign and mail with your admissions paperwork to:

Energy Medicine University PO Box 564, Mill Valley, California 94942 USA

## **University Catalog**

I have read a copy of the University catalog and the website that contains the rules, regulations, course completion requirements, and costs for the specific course/program in which I am applying. The information I have supplied on my application is true and accurate. I give EMU permission to verify my records and information for entrance into the program.

| Print Name:   | -                                    |
|---|--------------------------------------|
| Student Signature & Date:   |                                      |
| ✓ READ AND SIGN:  |                                      |
| Notice Concerning Transferability of Units Units you earn in our programs in most cases will probably not be transferable to any other coll example, if you entered our school as a freshman, you will still be a freshman if you enter anoth university at some time in the future even though you earned units here at our school. In additicertificate of completion in any of our programs, in most cases it will probably not serve as a backligher level degree at another college or university. | ner college or<br>ion, if you earn a |
| Students seeking to transfer credits earned at the Academy/University to another institution sho institution to which they seek admission to inquire as to that institution's policies on credit trans  |                                      |
| Print Name:   | -                                    |
| ✓ READ AND SIGN:  |                                      |
| Student Signature & Date:   |                                      |
| School Performance Fact Sheet I have read the Energy Medicine University School Performance Fact sheet.   |                                      |
| Print Name:   | -                                    |
| ✓ READ AND SIGN:  |                                      |
| Student Signature & Date:   |                                      |
| Administrator Signature & Date:   | _                                    |
|   |                                      |