

## Energy Medicine University Signature Form

*Please read, sign and email or postal to:*

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

Email: [Registrar@EnergyMedicineUniversity.org](mailto:Registrar@EnergyMedicineUniversity.org)

### 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: \_\_\_\_\_

### Notice Concerning Transferability of Units

Units you earn in our programs in most cases will probably not be transferable to any other college or university. For example, if you entered our school as a freshman, you will still be a freshman if you enter another college or university at some time in the future even though you earned units here at our school. In addition, if you earn a certificate of completion in any of our programs, in most cases it will probably not serve as a basis for obtaining a higher level degree at another college or university.

Students seeking to transfer credits earned at the Academy/University to another institution should contact the other institution to which they seek admission to inquire as to that institution's policies on credit transfer.

Print Name: \_\_\_\_\_



Student Signature & Date: \_\_\_\_\_

### Student Performance Fact Sheet

I have read the Energy Medicine University Student Performance Fact sheet.

Print Name: \_\_\_\_\_



Student Signature & Date: \_\_\_\_\_

Administrator Signature & Date: \_\_\_\_\_