KTC STUDENT AGREEMENT
Online Courses

The following agreement is made between the Online Course registrant (hereafter “the student”) and Klose Training & Consulting, LLC (hereafter KTC).

Scope of Practice
It is the responsibility of the student – not Klose Training – to ensure that the skills acquired through any Klose Training course are within their scope of practice as defined by their licensing board. Any therapist who practices outside their scope of practice is jeopardizing the health of their client/patient and is at risk of losing their license.

Course Materials and Access
Upon registration and payment of the course fee, you will be emailed the Student Agreement (below) within 3 business days. Once the Agreement is electronically signed by you and emailed back to Klose Training, a username and password for accessing the online course will be emailed to you within 3 business days. You will have 3 MONTHS of access to the online course from the time the access information is delivered. Course materials can be printed ONE time and then must be deleted from the student’s computer.

Online Quiz
In order to receive a Certificate of Completion, you must be a licensed health care professional and successfully complete the online quiz at the end of the course by answering 80% or more of the questions correctly.

Tuition & Refund Policy
Course tuition is specific to the course. (Refer to the KTC website.) The full amount is due at the time of registration. If the student cancels prior to the course access information being emailed, the student will be refunded the tuition by check within 10 business days, minus a nonrefundable administrative charge of $50.00. No refunds will be given after a username and password have been emailed to the student.

Certificate of Completion
Once a licensed professional health care provider has successfully completed the quiz and signed and returned to KTC the Course Evaluation Form, Tracking Log, and Student Information Form, that student will be emailed a Certificate of Completion. (Non-professionals are not eligible for a certificate.)

Continuing Education Credit
KTC’s online courses have been approved for CEUs for Physical, Occupational, and Massage Therapists by the organizations and states listed here: klosetraining.com/course/ceu-approvals/. See the course description pages on the KTC website for the contact hours associated with each online course.

Student Agreement:
I appreciate that the course materials and online content being provided to me by Klose Training & Consulting, LLC (KTC) contain confidential and privileged patient information and photographs. I acknowledge that these materials are protected by copyright and other laws governing intellectual property and are, unless otherwise stated, the property of KTC.

I understand that I may print the manual and other curriculum documents only one time for the sole purpose of my completing the online course I have purchased. I will not remove from the materials any references to KTC’s copyright nor otherwise reproduce or re-transmit any of the materials in whole or part, in any manner, without the prior consent of KTC. I understand to do so would be an ethical breach and a violation of copyright law. (These restrictions do not apply to course attachments that are clearly meant to be shared.)

I understand that I am the only person allowed to access the KTC online courses with my username and password. I will not share my username and password with any other individual nor allow anyone else access to the online course or curriculum.

I acknowledge that it is my responsibility to ensure that the skills acquired through any Klose Training course are within my scope of practice as defined by my licensing board.

Lastly, I acknowledge that KTC online courses are solely for the education and training of individual medical professionals. I understand that I may share my accumulated knowledge with other professionals but never, under any circumstances, train nor certify any other individual in the course topic unless granted instructor privileges according to KTC guidelines.

I hereby agree to the above conditions.

___________________________________________________________  _____________________
Your name Date

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