Registration Information, Dates, and Deadlines
Summer 2016 Term: July 4, 2016 - September 10, 2016

Registration Dates and Deadlines:
• Registration for Enrolled Students begins: Monday, May 23, 2016 at 8:30 am
• Registration Deadline: Friday, June 3, 2016 at 3:00 pm
• Enrollment Confirmation Deadline: Monday, July 11, 2016 at 4:30 pm

General Registration Policies:
• Registrations are accepted on a first come, first served basis.
• Registrations which are received before the registration start date and time will be processed at the end of the day on the registration start date.
• Walk-in, faxed (503-760-3332), and mailed, and emailed registrations will be date/time stamped in order of receipt. **If you fax in your registration, please call us at 503-760-3131 to confirm that it has been received.** If your fax doesn't go through, your registration will not be complete and could result in late fees. **If emailing your registration, send it to info@birthingway.edu.**
• If paying through PayPal, you must include a copy of your PayPal payment confirmation or your registration will be considered incomplete and delayed until the confirmation is received.

Do you need to register for Summer 2016 term?
• If you are enrolled in the Labor Doula or Postpartum Doula Program, then **YES**
  ➢ If you have not registered by the Enrollment Confirmation Deadline, you will be withdrawn from your program at Birthingway.
• If you are planning to graduate or certify during Summer 2016 Term, then **YES**
• If you will be doing Research Project or Independent Study, then **YES**
• If you are enrolled in the Midwifery Program or Lactation Consultation Program and will be working with a preceptor, then **MAYBE**
  ➢ If you are registering for one or more Clinical Training Credits, you must complete and turn in the Summer 2016 Registration and complete and turn in a Clinical Training Credit registration form with payment.
  ➢ **New for Summer Term only:** If you are working with a preceptor but do not want/need credit, you only have to complete and turn in a Clinical Training Credit registration form for zero credits. You do not have to register for term or pay registration fees.

Payment, Good Financial Standing, and Financial Aid:
• Good financial standing means that all charges are paid when due. If you are not in good financial standing, you will not be allowed to register for courses or workshops in a new term, have a transcript released, or graduate.
  ➢ **If you are not in good financial standing**, you may still register for the term to remain in your program (paying only your registration and technology fee).
• Payment of tuition and fees is due at the time of registration for each term unless you are eligible for a financial aid disbursement in the term (have a complete FAFSA on file and a signed award letter with an anticipated disbursement in this term), or have a written payment plan (enrolled Lactation Consultation Program Students only).
• All overdue amounts are subject to finance charges of 15% APR with a $5 minimum per month. Any costs incurred to collect these amounts are the responsibility of the student.
• **Financial Aid info for Midwifery Program students:**
  ➢ Eligibility for financial aid is based on your enrollment status as of the Enrollment Confirmation Date. We use this date to determine whether you are attending full, 3/4, half, or part time, and your corresponding financial aid award. No changes are made to your financial aid award after this date except in limited circumstances. For more information, see the 2016-17 Student Handbook and Catalog.
Registration begins: Monday, May 23, 2016 at 8:30 am
Registration Deadline: Friday, June 3, 2016 at 3:00 pm

After the Registration Deadline an additional $75 late fee is required.

Student Information (all fields are required unless noted):

<table>
<thead>
<tr>
<th>Legal First Name</th>
<th>Legal Middle Initial</th>
<th>Legal Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Is this a new address? □ Yes □ No</td>
<td>City</td>
</tr>
<tr>
<td>Phone</td>
<td>Email</td>
<td></td>
</tr>
</tbody>
</table>

Which program(s) are you enrolled in?

| □ Midwifery Program | □ Lactation Consultation Program |
| □ Labor Doula Program | □ Postpartum Doula Program |
| □ Childbirth Educator Program | □ I am not enrolled in a program |

Midwifery Program and Lactation Consultation Program Students:

Students enrolled in the Midwifery Program or Lactation Consultation Program are not required to register this term unless they plan to:

- a) Graduate during Summer Term
- b) Register for Clinical Training Credit
- c) Register for Independent Study
- d) Register for Research Project (Midwifery Program only)

Planning to graduate?

Please fill out the Graduation section on the other side of this form.

Planning to work with a preceptor during Summer 2016 Term?

- Please fill out and turn in a Clinical Training Credit registration form in addition to this registration form.
- If you will be doing Clinical Training but do not want to register for credit, you do not need to complete this form. You only need to turn in a Clinical Training Credit registration form and register for zero credits.

If you have any questions or would like clarification please contact your program coordinator.

Independent Study, 1-3 credit hours - Please fill out and submit a separate Independent Study registration form

Students interested in pursuing an Independent Study must initially complete an Intent Form designating the proposed topic, advisor, and credit value. Please meet with the Academic Coordinator or Faculty Coordinator for more information. Allow seven weeks prior to the term in which you will pursue the Independent Study to complete all preparatory steps. Course number will be determined by the Academic Coordinator based on rigor and amount of work.

Research Project (RSP411q), 1 credit hour - Please fill out and submit a separate Research Project registration form

Prerequisite: Research Methods (RSM311q).
Registration for this course is limited to midwifery program students.
This course focuses on the design and implementation of a research project, including definition of a topic, literature review, creation of a bibliography, and the production of a research paper.
Research Project Registration forms must be turned in by the first day of term.

All Students registering for Summer 2016 Term:

| Technology Fee: | $ 00.00 |
| Registration Fee: | $ 60.00 |

Late Registration Fee of $75.00: (due in addition to the Registration Fee if received after 3:00 pm on Friday, June 3, 2016)

TOTAL: $
CLINICAL TRAINING:
Will you be working with a preceptor this term?  □ Yes  □ No

If you marked “Yes” you must fill out a Clinical Training Credit Registration form. To indicate that you are working with a preceptor but will not be taking credits this term, please write in 0 credits. These forms help establish (on paper) the Preceptor-Student relationship and help outline expectations for work, learning, and appropriate tasks and duties.

Is this your first time registering for Clinical Training Credit? If so, please contact your Program Coordinator.

I am working with this preceptor: ________________________________
(Preceptor Name)

GRADUATION:
Do you intend to graduate in this term or the next?  □ Yes  □ No

If you marked “Yes” please write in the term and year you intend to graduate:

If you marked “Yes” please schedule a meeting with your Program Coordinator to discuss the graduation process.

PRIVACY PREFERENCE:
□ Privacy Protected – Do not share my information with anyone. (This term only.)

Student directory information will be shared with all currently enrolled students in the published student roster. This includes your name, address, phone number, Birthingway email address, matriculation year, certificates/degrees received, and program(s) of study. Birthingway will only release your name, program of study, matriculation year, and certificates/degrees received to the public upon request.

Students who choose to be privacy protected will not be listed on the student roster, and will not be acknowledged as a student of Birthingway to ANY outside inquiry, except as required under FERPA.

CANCELLATION CLAUSE:
Should you decide to cancel this agreement you must do so in writing within three business days to receive a full refund of all fees and tuition. After the three-day cancellation period, should you decide to cancel your registration and not attend, refunds will be made per the refund policy below.

REFUND POLICY:
You are expected to attend all classes for which you register. If you do not attend or stop attending and fail to drop within the refund period, you remain responsible for all tuition and fees. If you wish to drop a course, please fill out a Withdrawal/Drop Form (available on our website or in the front office) and either mail, fax, or hand it in to the front office. You will receive a refund of tuition per the refund schedule (see table).

Registration Fee, Late Registration Fee, and Technology Fee are non-refundable. Equipment Kit Fees, Course-pack Fees, and Lab Fees are non-refundable after the Registration Deadline. Please allow four to six weeks for receipt of refund.

The dates in this table are based on calendar days.

<table>
<thead>
<tr>
<th>Withdrawal Date</th>
<th>Tuition Refund</th>
</tr>
</thead>
<tbody>
<tr>
<td>On or before 1st day of term</td>
<td>100%</td>
</tr>
<tr>
<td>2nd day through 7th day of term</td>
<td>80%</td>
</tr>
<tr>
<td>8th day through 14th day of term</td>
<td>60%</td>
</tr>
<tr>
<td>15th day through 21st day of term</td>
<td>40%</td>
</tr>
<tr>
<td>22nd day through 28th day of term</td>
<td>20%</td>
</tr>
<tr>
<td>29th day through end of term</td>
<td>No Refund</td>
</tr>
</tbody>
</table>

Payment of tuition and fees is due at the time of registration for each term unless you are on financial aid and receiving a disbursement in that term, or have a written payment plan (Lactation Consultation Program Students only). To qualify for financial aid, you must have a completed Free Application for Federal Student Aid (FAFSA) and have a signed award letter on file at Birthingway showing a disbursement in that term. Federal Financial aid is only available for eligible Midwifery Program Students. Textbook and equipment kit charges are due when ordered, unless you are receiving a financial aid disbursement in the term and have authorized payment from your financial aid disbursement. All overdue amounts are subject to finance charges of 15% APR with a $5 minimum per month.

A student must be in good financial standing to register for courses, workshops, or Clinical Training Credit. Any costs incurred to collect these amounts are the responsibility of the student. Credit card payments are accepted through PayPal — for instructions, visit http://birthingway.edu/for-students/make-a-payment/ By paying through PayPal, you agree to PayPal and Birthingway’s terms and conditions. You must include a copy of your PayPal payment confirmation if paying by PayPal, or your registration will be incomplete and delayed until confirmation is received.

Registrations are accepted by mail or fax; walk-ins are accepted in the front office during office hours only (please see www.birthingway.edu for listed hours). Registrations will be date/time stamped in order of receipt. Registrations received BEFORE registration begins will be processed after 4:30pm on registration day, in order of receipt. Registrations received AFTER 3:00pm on the registration deadline will incur a $75 late registration fee. If you fax your registration (503-760-3332) it is your responsibility to call and confirm that we have actually received your fax. If your fax doesn’t go through, your registration will not be complete and could also result in late fees.

By signing below, I agree that I have read and understand all policies stated above.

STUDENT SIGNATURE (Required to process your registration) __________________________
DATE __________

OFFICE USE ONLY

<table>
<thead>
<tr>
<th>Date/Time/Payment/Initial:</th>
</tr>
</thead>
</table>

Please route: ____ FIN ____ REG ____ FIN ____ LRC ____ TECH ____ FAC ____ MPC ____ LPC ____ SPC ____ OC ____ REG

□ Has Financial Aid (cleared).

□ MW Program  □ LC Program  □ Specialized Program

Page 2 of 2
Summer 2016 Term
Lactation Consultation Program - Clinical Training Credit Registration Form

Lactation Consultation Program students working with a preceptor must complete this form each term

How to Register for Clinical Training Credit (CTC):

• Your preceptor(s) must be approved by Birthingway before you register for Clinical Training Credit.
• To register for Clinical Training Credit, you must complete full registration for this term and turn in this completed form with full payment (unless you are receiving a financial aid disbursement this term). If you fax this form, please call to confirm that we have received it.
  ➢ New for Summer Term Only: If you are registering for zero Clinical Training Credits you do not have to complete the Summer Term Registration or pay registration fees. However, you must complete this form.
• To indicate that you are working with a preceptor but will not be taking credits this term, please write zero credits.
• If you’ve already registered for Clinical Training Credit for this term and wish to add more credits, please fill out an additional Clinical Training Credit Registration form and only write in the number of credits you wish to add (not your total number of credits).

Dates and Deadlines:

• Deadline to add CTC: Friday, August 26, 2016 at 3:00 pm
  ➢ If you wish to register for clinical training credits after that point, your Program Coordinator must give you a Clinical Training Credit Registration Deadline Waiver, which must be attached to your registration form.
• You can count hours toward CTC until Saturday, September 10, 2016 at 11:59 pm
  ➢ After that date and time, any work you do cannot count towards CTC in Summer Term. Additional experiences and births may still count toward your requirements for licensure or certification, but may not be used for college credit.
• Clinical Training documentation is due: Monday, September 12, 2016 at 5:30pm
  ➢ Your completed clinical training documentation must be turned in to your Program Coordinator by this deadline in order to receive a grade of Complete. This includes your: Time Sheet, Evaluation of Preceptor by Student, Evaluation of Student by Preceptor, and Clinical Competencies Checklist.

Clinical Training Credit Registration FAQ:

• When can I start counting hours toward credit?
  ➢ You can only count hours towards this CTC registration from the time your completed Summer Term Registration and CTC Registration form are received, until 11:59 pm on Saturday, September 10, 2016. Any work you complete before submitting this form and payment will not count toward your total hours.
• What happens if I don’t complete enough hours?
  ➢ If you are not able to complete the hours required to receive credit, credit will not be awarded. Refunds for incomplete credits will not be considered.
• I am working with a preceptor but I don’t need/want credit, or I won’t get enough hours to get credit. Do I still need to register for CTC?
  ➢ Yes, you need to register for zero credits. Registering for zero credits will allow you to count hours and experience toward your IBLCE requirements, but not toward any Birthingway Clinical Training Credits.
  ➢ These forms help to document the Preceptor-Student relationship and outline expectations for work, learning, and appropriate tasks and duties.

Appropriate Duties for Clinical Training:

• Direct client care*
  ➢ in-person consultation, phone conversations with clients, providing client education
• Filing client information
• Charting
• Cleaning and maintaining clinic/office space
• Writing client information forms
• Maintaining a client library
• Maintaining equipment
• Attending staff meetings
• Completing statistical forms
• Attending peer review
• Ordering/purchasing supplies

*Direct Client Care must constitute at least 60% of the work performed.
**Lactation Consultation Program - Clinical Training Credit Registration Form**

**STUDENT**

<table>
<thead>
<tr>
<th>Legal First Name:</th>
<th>Legal Middle Initial:</th>
<th>Legal Last Name:</th>
</tr>
</thead>
</table>

**SUPERVISING PRECEPTOR**

<table>
<thead>
<tr>
<th>Legal First Name:</th>
<th>Legal Middle Initial:</th>
<th>Legal Last Name:</th>
</tr>
</thead>
</table>

Primary Business Address/Clinical Training Site:

Secondary Business Address/Clinical Training Site:

To add more clinical training sites, please fill out and attach an Additional Preceptors and Clinical Training Sites form.

I would like to register for the following number of Clinical Training Credits:

<table>
<thead>
<tr>
<th>Number of Hours (credits x 30):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Total Cost (credits x $218):</th>
</tr>
</thead>
</table>

Please note: If you’ve already registered for Clinical Training Credit for this term and wish to add more credits, please fill out a new Clinical Training Credit Registration form and write in the number of credits you wish to add (not your total number of credits).

**STUDENT**

- I agree to complete the number of hours indicated (see above) of appropriate clinical training duties and tasks as determined by my preceptor (and defined on Page 1).
- I agree to complete and turn in the clinical training paperwork as defined on Page 1.
- I understand that I may work more than the required minimum hours but that credit awarded will not be adjusted.
- I understand that I cannot retroactively apply hours toward credit - that I can only count hours towards this CTC registration after this completed form has been received by the Birthingway Front Office.

<table>
<thead>
<tr>
<th>Student (printed name) <em>Required</em></th>
<th>Student (signature) <em>Required</em></th>
<th>Date</th>
</tr>
</thead>
</table>

**PRECEPTOR(S)**

When estimating how many hours of work to agree to, consider the approximate number of clients the student will be attending during the term (or other methods you feel are appropriate).

As Supervising Preceptor, I guarantee to provide at least the number of hours indicated (see above) of clinical training duties and tasks (as defined on Page 1) during the contracted term. I agree to supervise the Student appropriately and meet all of the responsibilities of a clinical preceptor, including completing required paperwork.

<table>
<thead>
<tr>
<th>Supervising Preceptor (printed name) <em>Required</em></th>
<th>Supervising Preceptor (signature) <em>Required</em></th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Co-Preceptor (printed name)</th>
<th>Co-Preceptor (signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Co-Preceptor (printed name)</th>
<th>Co-Preceptor (signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Co-Preceptor (printed name)</th>
<th>Co-Preceptor (signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

**Co-Preceptor:** another Birthingway-approved preceptor in the same practice as the Supervising Preceptor with whom the Student may sometimes be supervised in clinical training. To list additional Co-preceptors, please fill out an Additional Preceptors and Clinical Sites form, available on our website at http://www.birthingway.edu/for-students/registration

**Office Use Only**

Date/time/payment/initial

Please route in this order: _______FAC _______FIN _______REG _______FIN _______FAC _______LPC _____REG

Midwifery Program students working with a preceptor must complete this form each term

How to Register for Clinical Training Credit (CTC):
• Your preceptor(s) must be approved by Birthingway before you register for Clinical Training Credit.
• To register for Clinical Training Credit, you must complete registration for this term and turn in this completed form with full payment (unless you are receiving a financial aid disbursement this term). If you fax this form, please call to confirm that we have received it.
  ➢ New for Summer Term Only: If you are registering for zero Clinical Training Credits you do not have to complete the Summer Term Registration or pay registration fees. However, you must complete this form.
• To indicate that you are working with a preceptor but will not be taking credits this term, please write zero credits.
• If you’ve already registered for Clinical Training Credit for this term and wish to add more credits, please fill out an additional Clinical Training Credit Registration form and only write in the number of credits you wish to add (not your total number of credits).

Dates and Deadlines:
• Deadline to count CTC toward enrollment status for Financial Aid: Monday, July 11, 2016 at 5:30 pm
  ➢ Credits added after that date and time will not be counted toward financial aid and this could affect your financial aid award. Please ask the Financial Aid Officer if you have questions.
• Deadline to add CTC: Friday, August 26, 2016 at 3:00 pm
  ➢ If you wish to register for clinical training credits after that point, your Program Coordinator must give you a Clinical Training Credit Registration Deadline Waiver, which must be attached to your registration form.
• You can count hours toward CTC until Saturday, September 10, 2016 at 11:59 pm
  ➢ After that date and time, any work you do cannot count towards CTC in Summer Term. Additional experiences and births may still count toward your requirements for licensure or certification, but may not be used for college credit.
• Clinical Training documentation is due: Monday, September 12, 2016 at 5:30pm
  ➢ Your completed clinical training documentation must be turned in to your Program Coordinator by this deadline in order to receive a grade of Complete. This includes your: Time Sheet, Evaluation of Preceptor by Student, Evaluation of Student by Preceptor, and Skills Assessment Checklist

Clinical Training Credit Registration FAQ:
• When can I start counting hours toward credit?
  ➢ You can only count hours towards this CTC registration from the time your completed Summer Term Registration and CTC Registration form are received, until 11:59 pm on Saturday, September 10, 2016. Any work you complete before submitting this form and payment will not count toward your total hours.
• What happens if I don’t complete enough hours?
  ➢ If you are not able to complete the hours required to receive credit, credit will not be awarded. Refunds for incomplete credits will not be considered.
• I am working with a preceptor but I don’t need/want credit, or I won’t get enough hours to get credit. Do I still need to register for CTC?
  ➢ Yes, you need to register for zero credits. Registering for zero credits will allow you to count hours and experience toward your NARM requirements, but not toward any Birthingway Clinical Training Credits.
  ➢ These forms help to document the Preceptor-Student relationship and outline expectations for work, learning, and appropriate tasks and duties.

Appropriate Duties for Clinical Training:
• Direct client care*
  ➢ prenatal visits, labor support, birth, newborn care, postpartum visits, phone conversations with clients, providing client education
• Processing lab work
• Filing client information
• Charting
• Typing birth certificates
• Cleaning and maintaining clinic/office space
• Ordering/purchasing supplies
• Attending Peer Review
• Writing client information forms
• Maintaining a client library
• Replenishing supplies for prenatal and birth bags
• Sterilizing instruments
• Maintaining equipment
• Attending staff meetings
• Maintaining medication logs
• Refilling oxygen tanks
• Completing statistical forms
• Transporting to and from one home visit per client

*Direct Client Care must constitute at least 75% of the work performed.
Midwifery Program - Clinical Training Credit Registration Form

**STUDENT**

<table>
<thead>
<tr>
<th>Legal First Name:</th>
<th>Legal Middle Initial:</th>
<th>Legal Last Name:</th>
</tr>
</thead>
</table>

**SUPERVISING PRECEPTOR**

<table>
<thead>
<tr>
<th>Legal First Name:</th>
<th>Legal Middle Initial:</th>
<th>Legal Last Name:</th>
</tr>
</thead>
</table>

Primary Business Address/Clinical Training Site:

Secondary Business Address/Clinical Training Site:

To add more clinical training sites, please fill out and attach an Additional Preceptors and Clinical Training Sites form.

I would like to register for the following number of Clinical Training Credits:

<table>
<thead>
<tr>
<th>Number of Hours (credits x 30):</th>
<th>Total Cost (credits x $218):</th>
</tr>
</thead>
</table>

**PLEASE NOTE:** If you’ve already registered for Clinical Training Credit for this term and wish to add more credits, please fill out a new Clinical Training Credit Registration form and write in the number of credits you wish to add (not your total number of credits).

**STUDENT**

- I agree to complete the number of hours indicated (see above) of appropriate clinical training duties and tasks as determined by my preceptor (and defined on Page 1).
- I agree to complete and turn in the clinical training paperwork as defined on Page 1.
- I understand that I may work more than the required minimum hours but that credit awarded will not be adjusted.
- I understand that I cannot retroactively apply hours toward credit - that I can only count hours towards this CTC registration after this completed form has been received by the Birthingway Front Office.

**PRECEPTOR(S)**

When estimating how many hours of work to agree to, consider the approximate number of clients the student will be attending during the term (or other methods you feel are appropriate).

As Supervising Preceptor, I guarantee to provide at least the number of hours indicated (see above) of clinical training duties and tasks (as defined on Page 1) during the contracted term. I agree to supervise the Student appropriately and meet all of the responsibilities of a clinical preceptor, including completing required paperwork.

<table>
<thead>
<tr>
<th>Supervising Preceptor (printed name) <em>Required</em></th>
<th>Supervising Preceptor (signature) <em>Required</em></th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Co-Preceptor (printed name)</th>
<th>Co-Preceptor (signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Co-Preceptor (printed name)</th>
<th>Co-Preceptor (signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Co-Preceptor (printed name)</th>
<th>Co-Preceptor (signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

Co-Preceptor: another Birthingway-approved preceptor in the same practice as the Supervising Preceptor with whom the Student may sometimes be supervised in clinical training. To list additional Co-preceptors, please fill out an Additional Preceptors and Clinical Sites form, available on our website at http://www.birthingway.edu/for-students/registration

**Office Use Only**

Date/time/payment/initial_____________________________________________________________________

Please route in this order: FAC FIN REG FIN FAC MPC REG

Page 2 of 2