

EXTERNAL TRANSFER STUDENT RELEASE FORM

the end of the document.
I acknowledge that I have been presented with the options available to me to complete my education and I have willingly decided to transfer to another institution to complete my credential.
 The college or university I have decided to transfer to is
I acknowledge that it is my responsibility to provide proof of enrollment at my new institution to the Art Institutes, in the form of an acceptance letter, enrollment agreement or class schedule. Upon receipt of proof of enrollment at my new institution, the Art Institutes will provide me with a tuition grant in the amount of <i>Five Thousand Dollars</i> (\$5000) to be applied toward tuition costs at my new institution.
I understand that I must submit proof of enrollment in a new institution to the Art Institutes via email to: ProofofEnrollment@dcedh.org
I understand that if I fail to provide the Art Institutes with proof of enrollment at my new institution, I am not eligible to receive the \$5000 tuition grant from the Art Institutes.
I understand that this offer expires on July 3, 2019. If I have not provided proof of enrollment to the Art Institutes by July 3, 2019, this offer expires, becomes null and void, and I am no longer eligible for the tuition grant.
I acknowledge that I am still responsible for any remaining balance due to the Art Institutes, if applicable, and agree to make payments as arranged.
I acknowledge this amount is more than what I am otherwise entitled to and is, therefore, consideration for the promises contained herein. I expressly acknowledge that the amount specified in this paragraph is all that I will ever receive from the Art Institute or any other released party for any and all claims.
I acknowledge and agree that I will not initiate or cause to be initiated against the Art Institute or any of its current, past, or future agents, board members, servants, employees, attorneys, fiduciaries subsidiaries, officers, owners, successors, divisions, affiliates, related companies, related organizations, and their successors and assigns, or any person or entity acting by, through, under or in concert with it (collectively referred to as "Released Parties"), in both their personal and corporate capacities, any lawsuit, compliance review, action, grievance proceeding or appeal, investigation or proceeding of any kind, or participate in same individually or as a representative or a member of a class, under any



contract (express or implied), law or regulation (federal state or local), or equitable remedy, pertaining or in any way related to any matter or thing occurring prior to the execution of this Agreement, including but not limited to claims arising or relating to Students relationship with The Art Institute, whether known to the parties at the time of execution of this agreement or not.

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I agree that pursuant to this Agree any and all claims, demands, damages, causunknown, suspected or unsuspected, based this Agreement.	ses of action, and any liability w	hatsoever, known or	
I agree that I will not, directly or ind except to the extent such disclosure may be otherwise required by law. Student understerminate any obligation of the Art Institute Institute to the Student must be immediate section shall not apply to disclosures made regulating the Art Institute or to disclosures this section SHALL apply to disclosures made media websites such as Facebook © and Tv	e required for accounting or tax stands that any breach of this so e, and that any payments previously ely returned to the Art Institute to governmental or regulatory s otherwise required by law. The le to any and all media, includir	reporting purposes or as ection will immediately ously made by the Art The prohibitions in this bodies responsible for the disclosure prohibitions in	
Student Name (Print)	Date of Birth	Date	
Student Signature	Student ID Number	Student ID Number	
If signatory/student is under the age of 18,	the Parent or Legal Guardian n	nust also sign below.	
Parent Name (Print)	Date		
Parent Signature			