



Roadmaster Drivers School of West Memphis, Inc.  
2800 E. North Service Road  
West Memphis, AR 72301

**Tennessee Resident  
Pre-enrollment Check List**

Date: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

***Student must place initials on the line beside each item to indicate the item was completed.  
Retain original for student file; give copy to student.***

- \_\_\_\_\_ Received a school catalog
- \_\_\_\_\_ Received a copy of the school's cancellation and refund policy
- \_\_\_\_\_ Toured the facility
- \_\_\_\_\_ Had time to review the school's policies in the catalog
- \_\_\_\_\_ Understands the programs length
- \_\_\_\_\_ Has been informed of total tuition and fee cost of the program
- \_\_\_\_\_ Has been informed of the estimated cost of books and supplies
- \_\_\_\_\_ Has signed and been given a copy of the Disclosure of Transferability of Credits
- \_\_\_\_\_ Understands that the signatures on this document in no way constitute a guarantee of placement of employment
- \_\_\_\_\_ Has been informed that and grievances not resolved at the school or corporation level may be forwarded to the Tennessee Higher Education Commission, Nashville, TN 37243-0830, (615) 741-5293

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of School Director

\_\_\_\_\_  
Date