



# STARKEY INTERNATIONAL INSTITUTE

## CERTIFIED HOUSEHOLD MANAGER PROGRAM

8-Week – Denver, CO  
(360 Curriculum Hours)

### REQUIRED APPLICATION MATERIALS

- \$500.00 Application Fee and Tuition deposit
- \$2,800.0 On-Site Residential Housing fee (non-refundable)
- Completed Admissions Packet including:
  - o Completed and Signed Admissions Application
  - o Typed 150 Word Personal Essay
  - o Signed Pre-Inquiry Release Authorization complete with notary
  - o Signed Enrollment Agreement
  - o Current Resume
  - o Goals Sheet
  - o Completed Technical Skills Self-Assessment
  - o Official Educational Transcripts
  - o Current Photograph

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**THE ENROLLMENT PROCESS CAN NOT START UNTIL  
THE ABOVE MATERIALS AND DEPOSITS ARE SUBMITTED**

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# STARKEY INTERNATIONAL INSTITUTE

1350 Logan Street Denver, Colorado 80203 303.832.5510 303.832.5015 fax  
 Approved and Regulated by the Division of Private Occupational Schools, Colorado Department of Higher Education

## ADMISSIONS APPLICATION

|                          |                |                |  |
|--------------------------|----------------|----------------|--|
| Date                     | School Term    | Housing        |  |
| Full Legal Name          |                |                |  |
| Current Address          |                |                |  |
| City                     | State          | Zip            |  |
| Previous Address         |                |                |  |
| City                     | State          | Zip            |  |
| Home Phone               | Cellular Phone | Business Phone |  |
| May We Call You At Work? |                |                |  |
| Email Address            |                |                |  |

## PERSONAL INFORMATION

|   |  |         |                    |                                |       |
|---|--|---------|--------------------|--------------------------------|-------|
| <b>PERSONAL INFORMATION</b>   |  |         |                    |                                |       |
| Birth Date  |  |         | Birth Place        |                                |       |
| US Citizen  |  | Yes     | No                 | If No, Then Work Permit Number |       |
| Passport Number   |  |         |                    |                                |       |
| Social Security #   |  |         | Driver's License # |                                | State |
| Marital Status  |  |         |                    |                                |       |
| Single  |  | Married |                    | Separated                      |       |
| Divorced  |  | Widowed |                    |                                |       |
| Have You Ever Been Convicted of a Felony?   |  |         | Yes                | No                             |       |
| If yes, Please Explain:   |  |         |                    |                                |       |
| Have You Ever Been Convicted of a DUI?  |  |         | Yes                | No                             |       |
| If Yes, Please Explain  |  |         |                    |                                |       |
| Is there any aspect of your physical or mental health, or any other issue in your personal life, that would interfere with your ability to perform the essential functions of this position safely and effectively? |  |         |                    |                                |       |
| Do You Drink Alcohol?   |  | Yes     | No                 | Do You Use Tobacco?            |       |
|   |  |         |                    | Yes                            | No    |
|   |  |         |                    |                                |       |

## EMERGENCY CONTACT

|                          |  |                       |                     |                   |     |
|--------------------------|--|-----------------------|---------------------|-------------------|-----|
| <b>EMERGENCY CONTACT</b> |  |                       |                     |                   |     |
| Name                     |  |                       | Relationship to You |                   |     |
| Address                  |  |                       |                     |                   |     |
| City                     |  |                       | State               |                   | Zip |
| Home Phone Number        |  | Cellular Phone Number |                     | Work Phone Number |     |
|                          |  |                       |                     |                   |     |

## MILITARY SERVICE

|   |  |  |                  |    |  |
|---|--|--|------------------|----|--|
| <b>MILITARY SERVICE</b>                 |  |  |                  |    |  |
| Branch                                  |  |  | Dates of Service |    |  |
| Rank                                    |  |  | Rate             |    |  |
| Enlistment Status                       |  |  | Reserve Status   |    |  |
| Did You Receive An Honorable Discharge? |  |  | Yes              | No |  |
| If No, Please Explain                   |  |  |                  |    |  |
|   |  |  |                  |    |  |

## EDUCATION

| EDUCATION  |                 |                   |                    |        |       |
|--|-----------------|-------------------|--------------------|--------|-------|
|  | Name<br>Address | Years<br>Attended | Graduation<br>Date | Degree | Major |
| High School  |                 |                   |                    |        |       |
| University   |                 |                   |                    |        |       |
| University   |                 |                   |                    |        |       |
| Trade School   |                 |                   |                    |        |       |
| Trade School   |                 |                   |                    |        |       |
| Trade School   |                 |                   |                    |        |       |
| Career<br>Training /<br>Occupational<br>Training                           |                 |                   |                    |        |       |
| Other<br>Education   |                 |                   |                    |        |       |
| Do You Speak Any Other Languages?<br>Please list language and proficiency. |                 |                   |                    |        |       |

## COMPUTER PROFICIENCY

| COMPUTER PROFICIENCY   |     |    |           |              |
|--|-----|----|-----------|--------------|
| Can You Type?  | Yes | No | How Fast? |              |
| Program  |     |    | Beginner  | Intermediate |
|  |     |    | Expert    | Don't Know   |
| MS Office Suite  |     |    |           |              |
| MS Word  |     |    |           |              |
| MS Excel   |     |    |           |              |
| MS Outlook   |     |    |           |              |
| Internet Explorer  |     |    |           |              |
| List Other Computer Programs With Which You Are Familiar and Level of Proficiency: |     |    |           |              |
|  |     |    |           |              |
|  |     |    |           |              |
|  |     |    |           |              |
|  |     |    |           |              |

## EMPLOYMENT HISTORY

(Begin with your MOST RECENT work experience)

**FAILURE TO COMPLETE THIS SECTION IN DETAIL WILL RESULT IN NON-ACCEPTANCE**

|                             |                     |
|-----------------------------|---------------------|
|                             |                     |
| Employer Name               | Dates of Employment |
|                             | Supervisor Name     |
| Employer Address            | Phone Number        |
|                             | Position Title      |
| Duties and Responsibilities |                     |
| Reason For Leaving          |                     |
|                             |                     |
| Employer Name               | Dates of Employment |
|                             | Supervisor Name     |
| Employer Address            | Phone Number        |
|                             | Position Title      |
| Duties and Responsibilities |                     |
| Reason for Leaving          |                     |
|                             |                     |
| Employer Name               | Dates of Employment |
|                             | Supervisor Name     |
| Employer Address            | Phone Number        |
|                             | Position Title      |
| Duties and Responsibilities |                     |
| Reason for Leaving          |                     |
|                             |                     |

## EMPLOYMENT HISTORY CONTINUED...

|  |                     |
|--|---------------------|
|  |                     |
| Employer Name  | Dates of Employment |
|  | Supervisor Name     |
| Employer Address   | Phone Number        |
|  | Position Title      |
| Duties and Responsibilities  |                     |
| Reason for Leaving   |                     |
|  |                     |
| Employer Name  | Dates of Employment |
|  | Supervisor Name     |
| Employer Address   | Phone Number        |
|  | Position Title      |
| Duties and Responsibilities  |                     |
| Reason for Leaving   |                     |
|  |                     |
| Employer Name  | Dates of Employment |
|  | Supervisor Name     |
| Employer Address   | Phone Number        |
|  | Position Title      |
| Duties and Responsibilities  |                     |
| Reason for Leaving   |                     |
|  |                     |
| <i>A Starkey representative will call current and previous employers, encompassing the past 10 years to interview and verify employment. PLEASE CONTACT previous employers to make them aware of the forthcoming call.</i> |                     |

## PERSONAL REFERENCES

*DO NOT LIST RELATIVES OR FORMER EMPLOYERS*

(Please contact your references and let them know they will be contacted)

|             |              |                |  |
|-------------|--------------|----------------|--|
|             |              |                |  |
| Name        |              | Address        |  |
| Years Known | Relationship | Home Phone     |  |
|             |              | Cellular Phone |  |
| Occupation  |              | Business Phone |  |
|             |              |                |  |
| Name        |              | Address        |  |
| Years Known | Relationship | Home Phone     |  |
|             |              | Cellular Phone |  |
| Occupation  |              | Business Phone |  |
|             |              |                |  |
| Name        |              | Address        |  |
| Years Known | Relationship | Home Phone     |  |
|             |              | Cellular Phone |  |
| Occupation  |              | Business Phone |  |
|             |              |                |  |
| Name        |              | Address        |  |
| Years Known | Relationship | Home Phone     |  |
|             |              | Cellular Phone |  |
| Occupation  |              | Business Phone |  |
|             |              |                |  |

## PROFESSIONAL REFERENCES

(Please contact your references and let them know they will be contacted)

|                |                  |
|----------------|------------------|
|                |                  |
| Reference Name | Business Address |
| Business Name  | Home Phone       |
| Position/Title | Cellular Phone   |
| Years Known    | Business Phone   |
|                |                  |
| Reference Name | Business Address |
| Business Name  | Home Phone       |
| Position/Title | Cellular Phone   |
| Years Known    | Business Phone   |
|                |                  |
| Reference Name | Business Address |
| Business Name  | Home Phone       |
| Position/Title | Cellular Phone   |
| Years Known    | Business Phone   |
|                |                  |

## PERSONAL ESSAY

In the space below, or on a separate sheet of paper, type an essay (150-word minimum) in your own words explaining why you wish to receive this training, how you will benefit from this training and what you can contribute to the Private Service Industry.

**PLEASE READ AND SIGN THE FOLLOWING:**

I have read the terms and conditions of acceptance in the Starkey International Institute for Household Management, Inc. (SII) catalog and agree that if accepted and registered, I will abide by them. I understand that it is my responsibility to acquire the necessary application materials to complete my file for review and will update my file with any changes in employment. I certify that answers provided by me on this application are true, correct, and complete to the best of my knowledge and that no facts have been omitted.

I authorize SII to obtain an investigative report containing information about me, including information obtained through personal interviews with my neighbors, friends and acquaintances. This report may include information as to my character, general reputation, personal characteristics, mode of living, my reliability, credit worthiness, employment history, and education (including school transcripts). I authorize SII to access my consumer credit report. I understand that any negative information obtained in these investigations may affect, as allowed by law, my admission eligibility, but that all information will be evaluated in light of my age at the time of an incident, the nature of the incident, and my mode of living since the incident occurred. **I understand that completion and processing of this application does not obligate SII to admit, hire or place me in any position.**

In the event that I am admitted, I authorize SII to distribute, copy and transmit, as allowed by law, the information obtained about me to potential employers for the purposes of securing potential employment for me, and to act as my agent in seeking such employment possibilities, understand that the stated placement policy of Starkey International Institute for Household Management, Inc. is that of full disclosure and that any information about me, whether provided by me or obtained through legal, authorized investigative means, may be provided to any prospective employer to whom I am presented for possible employment. I further understand that such information may, as allowed by law, prevent me from obtaining employment in the household management / household professional industry.

I acknowledge that the Starkey International Institute for Household Management, Inc. does not guarantee employment to me, and that by signing this form I acknowledge a full understanding of the full disclosure policy and its potential ramifications on my future employment.

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Applicant's Signature

Date

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Applicant's Printed Full Legal Name

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***All materials and deposits on the Admissions Checklist are mandatory. Your completed Acceptance Packet, including this Application, is imperative to the Acceptance Process. You are responsible for the completion and submission of any and all required documentation. Failure to do so will result in a delay to the Acceptance Process.***

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# STARKEY INTERNATIONAL INSTITUTE FOR HOUSEHOLD MANAGEMENT, INC.

## PRE-ADMISSIONS INQUIRY RELEASE

In connection with my application for enrollment in the Starkey International Institute for Household Management, Inc. (SII), I understand that investigative background inquiries are to be made on myself including, but not limited to, personal interviews with my neighbors, friends, previous employers and acquaintances. Further, I understand that you will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities and may access information relating to my credit, criminal, driving, civil, workman's compensation and other experiences. These reports may include information as to my character, general reputation, personal characteristics, reliability, and education (including school transcripts).

I authorize, without reservation, any party or agency contracted by SII to furnish the above mentioned information. I hereby consent to your obtaining the above information from any licensed agents or services. I understand to aid in the proper identification of my files or records the following information is necessary.

|                         |                 |                 |               |
|-------------------------|-----------------|-----------------|---------------|
| Full Legal Name         |                 |                 |               |
| Maiden Name             |                 | Aliases         |               |
| Current Address         |                 |                 |               |
| City                    |                 | State           | Zip           |
| Home Number             | Cellular Number | Business Number |               |
| Social Security Number  |                 |                 | Date of Birth |
| Driver's License Number |                 | State           |               |

Applicant Signature

Date

Subscribed and affirmed, or sworn to before me, in the State of \_\_\_\_\_, County of \_\_\_\_\_, This \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (Applicant), who executed this form in my presence and presented the identification described above.

\_\_\_\_\_  
Notary Public Signature

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public Printed Name

Notary Seal



# STARKEY INTERNATIONAL INSTITUTE FOR HOUSEHOLD MANAGEMENT, INC.

1350 Logan Street, Denver, CO 80203 Phone: 303-832-5510 Fax: 303-832-5015  
 Email: admissions@starkeyintl.com

Approved and Regulated by the Colorado Department of Higher Education, Private Occupational School Board

## EIGHT WEEK CERTIFIED HOUSEHOLD MANAGER COURSE (360 Curriculum Hours)

### Enrollment Agreement

#### Personal Information and Identification

|                 |                 |                 |
|-----------------|-----------------|-----------------|
| Full Legal Name |                 |                 |
| Address         |                 |                 |
| City            | State           | Zip             |
| Home Number     | Cellular Number | Business Number |
| Birth Date      | Place of Birth  |                 |

#### Tuition, Fees and Other Expenses

| <i>Tuition and Fees Subject To Cost Change</i>  |                    |
|---|--------------------|
| ITEM  | RATE               |
| Admissions Deposit Fee (Due at time application is received)  | \$500.00           |
| Tuition: Certified Household Management Graduate Course   | \$9,500.00         |
| <b>The Following are Non-Refundable:</b>  |                    |
| Books and other Materials (Software not included)-----  | \$820.00           |
| Meals-----  | \$2,650.00         |
| Field Trips and Specialty Classes-----  | \$598.00           |
| <i>*These items are not optional and cannot be deleted, substituted for or privately provided. Each item will require participation from the student and will count toward graduation and certification through Starkey International Institute for Household Management.</i> |                    |
| Non-Refundable On-Site Housing Deposit (Due at time application is received)  | \$2,800.00         |
| <b>TOTAL DUE (With Housing in the Mansion) – First Come First Serve Basis (prices subject to change)</b>  | <b>\$16,868.00</b> |
| <b>TOTAL DUE (With-Out Housing in the Mansion)</b>  | <b>\$14,068.00</b> |

- Type of Instruction: Classroom (Theory, Practical and Application)
- Candidacy: Enrollment Agreement is for Certified Household Manager Course
  - I have reviewed the current catalog for the course and understand the hours and content.
- Financial: The aforementioned cost of attending the Institute and the method of payment are subject to the terms and refund policy stated in this agreement. Indicate how the Balance Due is to be paid: \_\_\_\_\_  
\_\_\_\_\_
- Intent of Payment:
  - Full Payment 21 days prior to start date of course (Check, Money Order, Cashier's Check, Debit or Credit Card)
  - Approved Sponsorship (Reviewed on a Case-by-Case Basis)
  - Other; Please Explain: \_\_\_\_\_

By signing this contract, the student agrees to pay SII the total stated tuition and fees. SII agrees to provide the occupational training in accordance with the provisions of the current catalog. Payment of all monies due 21 days prior to the start date of the course shall be a condition of continuing enrollment. Upon satisfactory completion of all academic and skill requirements and when all financial obligations to the school have been met, SII will award the educational credentials for this course to the student. The student and the school understand that this enrollment agreement, which includes the refund policy, may not be amended except in writing signed by both parties.

|                        |      |
|------------------------|------|
| Applicant Signature    | Date |
| Director of Admissions | Date |

The Student agrees to comply with SII rules and regulations during his/her program of study, and SII has the privilege of cancelling this agreement and expelling the Student in the event of the Student's failure to comply with the rules and regulations as stated in the current catalog. The Student may also be terminated for failure to maintain a satisfactory grade point average, excessive absences, or non-payment of tuition or other costs. To be eligible for graduation and to receive a certificate, the Student must complete all courses, including theory and laboratory instruction with an overall grade point average of at least 2.0 and be current in all financial obligations to the Institute. If the Student fails to complete satisfactorily any course due to excessive absences or deficient grades, then he/she will be allowed to repeat such course at the next available offering. SII reserves the right to select which courses will be offered each term and to substitute other courses for those listed in the program of study which do not substantially alter the integrity of the program. In accepting applications, SII assumes the obligation of furnishing a complete program, teachers, equipment, laboratories, classrooms, and other facilities necessary for teaching this program at a stated offered tuition cost for the program as inserted previously in this agreement. In the event SII is unable to perform any of its obligations under this agreement by reason of fire, strike, work stoppage, riot, utility failures or shortages or damages by the elements, Acts of God, or of any unavoidable casualty, SII shall not be responsible for damages caused by delay or failure to perform hereunder, provided said delay does not exceed 90 days and the Institute evidences positive efforts every 30 days to reactivate SII. Refunds at any time will be made only in accordance with the refund policy of the Institute as printed below:

### REFUND POLICY

Students not accepted by the school and students who cancel this contract by notifying the school within three (3) business days prior to the class start date are entitled to a full refund of all tuition and fees paid. Students who withdraw after three (3) business days but before commencement of classes are entitled to a full refund of all tuition and fees paid except the cancellation fee of \$150.00. In the case of students withdrawing after commencement of classes, the school will retain a cancellation fee, the non-refundable charges, plus a percentage of tuition and refundable fees based upon the percentage of contact hours attended as described in the table below. The refund is based on the last date of recorded attendance. The housing deposit is non-refundable.

| Student is Entitled to Upon Withdrawal/Termination | Refund Of |               |
|--|-----------|---------------|
| Within first 10% of program                        | 90%       | less \$150.00 |
| After 10% but within first 25% of program          | 75%       | less \$150.00 |
| After 25% but within first 50% of program          | 50%       | less \$150.00 |
| After 50% but within first 75% of program          | 25%       | less \$150.00 |
| After 75%  |           | no refund     |

- Student may cancel this contract at any time prior to close of the third business day after signing this contract.
- The official date of termination for refund purposes is the last date of recorded attendance. All refunds will be made within 30 days from the date of termination.
- All other charges are non-refundable.
- The policy for granting credit for previous training shall not impact the refund policy.
- Policy regarding postponement of starting date and the effect on student's rights to a refund: "Postponement of a starting date, whether at the request of the school or the student, requires a written agreement signed by the student and the school. The agreement must set forth:
  - o Whether the postponement is for the convenience of the school or the student, and:
  - o A deadline for the new start date, beyond which the start date will not be postponed.
- If the course is not commenced, or the student fails to attend by the new start date set forth in the agreement, the student will be entitled to an appropriate refund of prepaid tuition and fees within 30 days of the deadline of the new start date set forth in the agreement, determined in accordance with the school's refund policy and all applicable laws and rules concerning the Private Occupational Act of 1981.
- The student will receive a full refund of tuition and fees paid if the school discontinues a course/program within a period of time a student could have reasonably completed it, except that this provision shall not apply in the event the school ceases operation.
- Complaints, which cannot be resolved by direct negotiation between the student and the school, may be filed with the Division of Private Occupational Schools of the Colorado Department of Higher Education, 1560 Broadway, Suite 1600, Denver, Colorado 80202, (303)866-2723, or online at <http://highered.colorado.gov/dpos>. There is a two-year limitation on the Division taking action on student complaints. The Division shall not consider any claim that is filed more than two years after the date the student discontinues their training at the school.

*The Institute makes neither a guarantee for placement following training nor of credit transfer. The parties executing this Enrollment Agreement hereby acknowledge that they have read, understood and received a copy of this agreement, the Institute application and current school catalog.*

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Applicant Signature

Date

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Director of Admissions

Date



# STARKEY INTERNATIONAL INSTITUTE

## GOALS I EXPECT TO ACCOMPLISH DURING TRAINING

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STUDENT NAME

1

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2

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3

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4

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5

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6

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7

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8

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9

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10

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# STARKEY INTERNATIONAL INSTITUTE

## TECHNICAL SKILLS SELF ASSESSMENT

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STUDENT NAME

The following is a Technical Skills Self-Assessment Matrix. This Matrix will be discussed in various formats during the course of the four and eight week programs.

Taking the service standards listed on the left side, please evaluate yourself on a scale of one to ten (one being low ability and ten being high ability). This form is a self-assessment tool to determine where you see your present skills now, and then you will re-assess the same skills at the end of the program.

| SERVICE STANDARDS                    | RATE YOUR SKILLS |
|--------------------------------------|------------------|
| Management Skills                    |                  |
| Administrative Skills                |                  |
| Organization Skills                  |                  |
| Computer Proficiency                 |                  |
| Housekeeping Knowledge               |                  |
| Cooking / Culinary Skills            |                  |
| Clothing / Personal Care Skills      |                  |
| Entertaining Skills                  |                  |
| Event Coordination Skills            |                  |
| Property / Grounds Skills            |                  |
| Household Maintenance Skills         |                  |
| Household / Property Security Skills |                  |
| Child / Elder / Pet Care Skills      |                  |
| Travel / Concierge Skills            |                  |
| Vendor Management Skills             |                  |
| Construction Contract Mgt Skills     |                  |
| <b>TOTAL POINTS</b>                  |                  |

Please return this form with your completed admissions application.