



The Institute of Holistic Nutrition

The Industry Leader in Training Nutrition Professionals

Toronto Campus – Head Office

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T: 416.386.0940 E: info@instituteofholisticnutrition.com

North York (Toronto) Campus

18 Wynford Drive, Suite 514

North York, ON M3C 3S2

T: 416.386.0940

Program Information - Applied Holistic Nutrition program

The **Applied Holistic Nutrition** program provides a Diploma upon graduation and a Certified Nutritional Practitioner (CNP) certification. There are 564.5 in-class hours and a mandatory 140 hour co-op placement

- Part-time Day-Time Applied Holistic Nutrition program lasting 28 months
 - Part-time Evening Applied Holistic Nutrition program lasting 22 months
- Language of Instruction is English

Admission Requirements

To be eligible for entry, applicants must provide prior to commencement of program:

- Ontario Secondary School Diploma (O.S.S.D.) OR Canadian Adult Achievement Test-Level D is required. (CAAT-Level D) OR British Columbia Certificate of Graduation or their equivalent OR Post-secondary documentation
- Completed IHN Enrollment Contract
- An autobiography (2-3 pages typed and doubled-spaced about yourself and your interest in this field)
- A current resume
- In-person interview (online video call or phone interviews are accepted for International applicants only)
- Government Issued Photo Identification
- Canadian Citizenship OR Permanent Residency OR Valid Student Study Visa
- English Language Proficiency, when necessary
- Non-refundable tuition deposit/enrollment fee

*You may submit the above documentation through mail, email, or to your desired campus. Please note that space cannot be reserved without a completed enrollment contract, an interview with a program advisor, other required documentation, and a non-refundable tuition deposit/enrollment fee of CAN \$500.00, regardless of the chosen payment option.

Payment Schedule Options (Current fees are applicable to students commencing the program in the year of 2022)

Upon registration, IHN requires a CAN \$500 non-refundable tuition deposit/enrollment fee. Acceptable methods of payment are Cash, Cheque, Interac, MasterCard, Visa and Money Order. All tuition invoices/receipts are e-mailed, unless requested otherwise. You have one opportunity to change your payment plan in relation to options B through D. No refunds are issued upon payment plan option changes.

Option A Payment in full of CAN \$7,296.00 + \$500.00 is required on day of registration for the complete Part-time diploma programs. This option is not available after the commencement of classes.

Part-Time Program (Up to 2.5 Years)

Daytime program is either Monday/Wednesday or Tuesday/Thursday from 10:00am - 2:00pm (Approximately 2.5 Years).

Evening program - Monday and Thursday evenings from 6:00pm - 9:30pm (2 Years).

First installment is due two weeks before the beginning of Semester (Orientation Day) .

Option B Deposit due with registration: \$500.00
3 installments (6-month intervals): \$2,432.00
Plan fee due with 1st installment: \$250.00

Option C Deposit due with registration: \$500.00
4 installments (5-month intervals): \$1,824.00
Plan fee due with 1st installment: \$350.00

Option D Payment of tuition on a course-by-course basis is due on or prior to the first day of class. Please view IHN's website, or ask a Program Advisor at your desired campus for details. The course fees are subject to annual price increases, with the student paying the most current fee for a course. A change of payment plan D is permitted within the first 6 months and can only be changed to payment plan B or C.

Course Exemptions

Official transcripts must be submitted before the commencement of the program in order for a tuition reduction to be processed for exemptions granted. Official transcripts submitted or request for exemption after the student commencement of the program will receive consideration for course exemption but will receive NO tuition credit.

ENROLLMENT CONTRACT – Applied Holistic Nutrition Program

This Enrollment Contract is subject to the *Private Career Colleges Act, 2005* and the regulations made under the Act

The undersigned person hereby enrolls as a student of The Institute of Holistic Nutrition;

Mr. Miss Mrs. Ms.

Student Last Name _____ Student First Name and Middle Name _____

Student Local Mailing Address Street Name and Number _____ City _____ Province _____ Postal Code _____

Student Telephone Number _____ Cell Phone Number _____ E-Mail Address _____

Student Permanent Address Street Name and Number _____ City _____ Province/State _____ Postal Code _____

Country _____ Date of Birth MM/DD/YYYY _____ Where did you hear about IHN? _____

International Student Yes No Emergency Name / Relationship / Contact # _____

Secondary School Attended _____ City, Province, and Last Year Attended _____ Diploma/Certificate _____

Post-Secondary School Attended _____ City, Province, and Last Year Attended _____ Degree/Diploma/Certificate _____

Program Information

The *Applied Holistic Nutrition* program provides a Diploma upon graduation and a Certified Nutritional Practitioner (CNP) certification. There are 564.5 in-class hours and a 140 Co-Op Placement totaling 704.5 program hours, with part-time evening program lasting 2 years and part-time daytime program lasting up to 2.5 years.

Location of Study: North York (Toronto) Campus
 Location of Practicum: N/A _____
 Language of Instruction: English Other _____

Part-Time Evening – Commences in September annually. Two-year program.

September 201Y Program ends July 202Y

Part-Time Daytime – Commences in January and September annually. Approximately 2.5 year program.

January 202Y Program ends December 202Y | **September 202Y** Program ends December 202Y

Class Schedule & Payment Options

PART-TIME EVENING: Monday & Thursday 6pm -9:30pm OPTION: A B C D
 PART-TIME DAYTIME: Monday & Wednesday 10am – 2pm OPTION: A B C D
 (Please Check) Tuesday & Thursday 10am – 2pm OPTION: A B C D

Please fill in if applicable

I authorize IHN to automatically charge my credit card provided below to process payment(s) of my tuition installment(s), mandatory digital course notes or other materials associated with program when due;

CREDIT CARD NUMBER _____ EXPIRY DATE ____/____ CVV No. ____ VISA MASTERCARD

Name on Card: _____ Signature _____ Date: _____
 (MM/DD/YY)

*Social Insurance Number (S.I.N) _____ (Mandatory Requirement for Canadian T2202 Tax Receipts)

Tuition Fees			
Tuition	CAN\$	7296.00	
Non-refundable tuition deposit/enrollment Fee	CAN\$	500.00	
<i>(Total Tuition + Deposit = CDN \$7,296.00 + \$500.00)</i>			
Payment Plan Fees			
Payment Plan Administration Fees			
Option B Part-Time Administration Fee	CAN\$	250.00	
Option C Part-Time Administration Fee	CAN\$	350.00	
Textbooks (prices subject to change) *HST/GST applies to non-program books	CAN\$	1222.59	
<input checked="" type="checkbox"/> Mandatory Digital course notes fee <i>Non-Refundable upon commencement of program *Due with the first installment. This fee includes course notes for the complete diploma program* HST/GST applies if not purchased through program</i>	CAN\$	190.00	
International Student Fee (non-refundable)	CAN\$	2,500.00	+ HST
Optional Fees			
Additional transcripts (transcript received upon graduation is complimentary)	CAN\$	25.00	+ HST
Returned cheque(s) results in an NSF charge	CAN\$	20.00	+ HST
Out of Province Campus Transfer Fee	CAN\$	250.00	+ HST
Course Grade Resolution Dispute	CAN\$	50.00	+ HST
Reprinting of official Diploma and/or CNP Certification documents	CAN\$	40.00	+ HST
Mailing of official documents (Domestic)	CAN\$	20.00	+ HST
Course Re-take Fee: <i>where a student wishes to retake a course that has already been successfully completed, payment of 50% of the current course fee plus HST is required.</i>	CAN\$	520.00	+ HST
Payment Plan Administrative Fee ranges from: \$200-\$350 depending on option	CAN\$	350.00	+ HST

- Books may be purchased on a course-by-course basis and are supplied at a discount through IHN
- Students must retake any failed course in the next available session. Full charges of the current course price will apply and are due on or before the first class of the course
- Incomplete courses (dropping out of a course after the 30 percent mark) will be subject to full charges of the current course price on or before the first class of the course.
- If a student wishes to retake a course that has already been successfully completed, payment of 50% of the current course fee is required
- All academic and financial obligations must be met before grade reports, transcripts, certificates and diplomas are issued and/or released
- For refund requests where the original credit card is no longer valid a 5% charge of the refunded amount will be levied.

COURSE BREAKDOWN AND INDIVIDUAL COURSE PRICE LIST

Effective for Courses Commencing in the year of 2022

OPTION D

Payment of tuition on a course-by-course basis. Payments are due on or prior to the first day of class. The course fees are subject to annual price increases, with the student paying the most current fee for a course. A change of payment plan D is permitted within the first 6 months. Payment plan D can only be changed to payment plan B or C. Please see below for individual course fees, which are effective for courses commencing in the year of 2022.

Course	Description	Credit Value	Session	Length	Total Hours	Price
FN001	Nutrition & Health: The Fundamentals	12	12 sess.	6 weeks	42	CAN \$632
BC001	Biological Chemistry	07	8 sess.	4 weeks	28	CAN \$422
HAP01	Human Anatomy & Physiology <i>Recommended Prereq: BC001</i>	12	12 sess.	6 weeks	42	CAN \$632
AMB02	Ayurveda: Mind/Body Healing	07	7 sess.	3.5 weeks	24.5	CAN \$368
NE009	Nutrition & the Environment <i>*Field Trip Included</i>	07	8 sess. <i>+ Field Trip</i>	4 weeks	28 4	CAN \$481
BM002	Body Metabolism <i>Prereq: BC001 & HAP01</i>	07	8 sess.	4 weeks	28	CAN \$422
PHC005	Preventive Health Care <i>Recommended Prereq: FN001</i>	09	8 sess.	4 weeks	28	CAN \$422
NS003-I	Nutritional Symptomatology Part 1 <i>Prereq: HAP01</i>	09	10 sess.	5 weeks	35	CAN \$527
NS003-II	Nutritional Symptomatology Part 2 <i>Prereq: NS003: Part 1</i>	10	10 sess.	5 weeks	35	CAN \$527
NP07	Nutritional Pathology <i>Prereq: HAP01</i>	10	9 sess.	4.5 weeks	31.5	CAN \$474
HFP04	Holistic Food Preparation	05	*3 sess.	3 weeks	18	CAN \$369
HM008	Herbal Medicine <i>*Herb Walk Included</i>	08	9 sess. <i>+ Herb Walk</i>	5 weeks	31.5 3.5	CAN \$527
NR006	Advanced Nutrition Research	06	6 sess.	3 weeks	21	CAN \$316
PSD01	Professional Skills Development	08	8 sess.	4 weeks	28	CAN \$422
CD011	Comparative Diets	07	7 sess.	3.5 weeks	24.5	CAN \$368
PP001	Professional Practice	08	9 sess.	4.5 weeks	31.5	CAN \$474
NLS010	Nutrition through the Lifespan	07	8 sess.	4 weeks	28	CAN \$422
POD012	The Psychology of Disease	08	8 sess.	4 weeks	28	CAN \$422
FSN013	Fitness & Sports Nutrition <i>Recommended Prereq: BM002</i>	06	7 sess.	3.5 weeks	24.5	CAN \$368
Total					564.5 hours	
PP002	Professional Co-op Placement	15		TBA	140	N/C

Session = 3.5 hours *HFP04 – 1 session @ 6 hours *Weeks/prices indicated are per course and not cumulative **704.50 hours**

Additional Considerations

- The non-refundable registration deposit of **CAN \$500.00** is valid up to one year, after which time the registration is null and void
- Upon program commencement, the deposit, administrative fees, and tuition paid to date is valid up to five years from the program withdrawal date and may be used towards the regular diploma program only
- If an individual withdraws, or does not pursue enrollment into courses, for over a period of five years, all Nutrition-related courses must be retaken due to the current nature of the course material
- An individual has up to five years to complete the program from the initial start date

I certify that I have read, understood the **Additional Considerations** section above;

Date _____

(Signature of Student)

Consent to Use of Personal Information

Private career colleges (PCCs) must be registered under the Private Career Colleges Act, 2005, which is administered by the Superintendent of Private Career Colleges. The Act protect students by requiring PCCs to follow specific rules on, for example, fee refunds, training completions if the PCC closes, qualifications of instructors, access to transcripts and advertising. It also requires PCCs to publish and meet certain performance objectives that may be required by the Superintendent for their vocational programs. This information may be used by other students when they are deciding where to obtain their training. The consent set out below will help the Superintendent to ensure that current and future students receive the protection provided by the Act.

I, _____, allow The Institute of Holistic Nutrition to give my name, address, telephone number, e-mail address and other contact information to the Superintendent of Private Career Colleges for the purposes checked below:

- To advise me of my rights under the *Private Career Colleges Act, 2005* including my rights to a refund of fees, access to transcripts and a formal student complaint procedure;
- To collect information on the performance of The Institute of Holistic Nutrition, for example, the percentage of students who graduate from programs and the percentage of graduates who find employment; and
- To determine whether The Institute of Holistic Nutrition has met the performance objectives required by the Superintendent for its vocational programs.
- For The Institute of Holistic Nutrition to occasionally take photos and video of students throughout the program for use towards promotional and marketing materials. By signing below, you are authorizing The Institute of Holistic Nutrition to use your photo(s) in trade publications, flyers, handouts, and web media without compensation.

I understand that I can refuse to sign this consent form and that I can withdraw my consent at any time for future uses of my personal information by writing to info@instituteofholisticnutrition.com. I understand that if I refuse or withdraw my consent the Superintendent may not be able to contact me to inform me of my rights under the Act or collect information to help potential students make informed decisions about their educational choices.

(Name of Student)

(Signature of Student)

Date

Acknowledgement

I, _____, acknowledge that I have received a copy of:

- The Consent to Use of Personal Information
- The Payment Schedule
- Graduation Eligibility Policy
- ADDENDUM A** - The Statement of Students' Rights and Responsibilities Issued by the Superintendent of Private Career Colleges
- ADDENDUM B** - The College's Fee Refund Policy
- ADDENDUM C** - The College's Student Complaint Procedure
- ADDENDUM D** - The College's Policy Relating to the Expulsion of Students
- ADDENDUM E** - The College's Sexual Violence Policy

 (Signature of Student) Date _____

The Institute of Holistic Nutrition does not guarantee employment for any student who successfully completes a vocational program offered by The Institute of Holistic Nutrition.

It is understood that fees are payable in accordance with the fees specified in this Enrollment Contract and all payments of fees shall become due forthwith upon a statement of accounting being rendered. **The Institute of Holistic Nutrition** reserves the right to cancel this Enrollment Contract if the undersigned student does not attend classes during the first 14 days of the program begins. **For information regarding cancellation of this Enrollment Contract and refunds of fees paid, see sections 25 to 33 of O. Reg. 415/06 made under the *Private Career Colleges Act, 2005*.**

Every student is entitled to a copy of the signed contract immediately after it is signed as per, O. Reg. 415/06, S.20 (1); O. Reg. 132/16, s. 2; O. Reg. 466/16, s. 8 (1, 2)

- I certify that I have read, understood and have received a copy of this Enrollment Contract.**

The undersigned student hereby undertakes and agrees to pay, or see to payment of, the fees specified in this Enrollment Contract in accordance with the terms of this Enrollment Contract.

 (Signature of Student) Date _____

The Institute of Holistic Nutrition agrees to supply program to the above named student upon the terms herein mentioned. The Institute of Holistic Nutrition may cancel this Enrollment Contract if the above named student does not meet the admission requirements of Applied Holistic Nutrition before the program begins.

 (Signature of Admission Officer, Registrar, Agent) Date _____

OFFICE USE ONLY

Registration Status:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Pending – due to:	<input type="checkbox"/> Applicant Copy <input type="checkbox"/> Deposit Received
Registered Campus:	<input type="checkbox"/> North York (Toronto) Campus			
Student Number:				
Change of Name:				Date:



The Institute of Holistic Nutrition
THE INDUSTRY LEADER IN TRAINING
NUTRITION PROFESSIONALS
Established 1996

IHN Course Notes Copyright and User Agreement

The Institute of Holistic Nutrition (IHN) has transitioned to digital course notes which benefits students in the following ways:

- A significant decrease in the overall cost of required course material (Originally \$490.50, now \$190.00 CAD)
- Lessen the environmental impacts of printing hard copies of course notes.
- Ability to download and print only portions of notes that are required by students.

USER EXPECTATIONS: I, _____ acknowledge, understand and agree to the following terms:

- I acknowledge that the "IHN Course Notes" is protected under copyright laws. Reproduction and/or distribution of the IHN Course Notes without written permission of IHN is prohibited.
- I acknowledge that the material contained within IHN Course Notes, (both print and digital versions), is proprietary to The Institute of Holistic Nutrition (IHN).
- I agree to not make copies, (digital or otherwise), and that no part of the IHN Course Notes publication may be reproduced, distributed, or transmitted in any form or by any means, including photocopying, recording, or other electronic or mechanical methods, without the prior written permission of IHN, except in the case of brief quotations embodied in critical reviews and certain other non-commercial uses permitted by copyright law.
- I will make payment for the purchase of the IHN Course Notes on the date that I pay my first tuition installment.

I certify that I have read, understood, and agree to the terms above;

Student Name

Student Signature

Date