



# Larsen Inspection Training

2191 Fifth Street, Suite #101, Norco California 92860

(951) 817-9080 • Fax (951) 817-9081

www.larseninspectiontraining.com

Name: \_\_\_\_\_  
Last First Initial

## Classroom Enrollment Agreement

Course Description:	Cost	
Prestressed Concrete – 60 hours	\$1000.00	
Reinforced Concrete – 80 hours	\$1375.00	
Soils – 55 hours	\$800.00	
Spray-applied Fireproofing - 20 hours	\$375.00	
Structural Masonry – 80 hours	\$1375.00	
Structural Steel and Bolting – 55 hours	\$800.00	
Structural Welding – 55 hours	\$800.00	
<b>Plans Deposit required on the first day of Class</b>	\$20.00	\$20.00
		<b>TOTAL AMOUNT</b>

**YOU ARE RESPONSIBLE FOR THIS AMOUNT. THIS ENROLLMENT AGREEMENT IS LEGALLY BINDING WHEN SIGNED BY YOU AND ACCEPTED BY LARSEN INSPECTION TRAINING.**

**PLANS CAN NOT BE UNSTAPLED OR COPIED IN ANY WAY**

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Print Name

<p><b>Terms:</b>  <b>\$75.00 of each Tuition is nonrefundable registration fee.</b>  Half of the tuition paid at the beginning of the course, on-going payments as homework is received.  Entire amount to be paid by the half way point of the course.</p>
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# Larsen Inspection Training Student Application Classroom

Date:

**Please indicate which class you will be taking:**

- PRESTRESSED CONCRETE SPECIAL INSPECTOR
- SOILS SPECIAL INSPECTOR
- SPRAY-APPLIED FIREPROOFING SPECIAL INSPECTOR
- STRUCTURAL MASONRY SPECIAL INSPECTOR
- STRUCTURAL STEEL AND BOLTING
- STRUCTURAL WELDING SPECIAL INSPECTOR
- REINFORCED CONCRETE SPECIAL INSPECTOR

**Please print the requested information.**

**NAME:**

\_\_\_\_\_  
LAST FIRST INITIAL

**ADDRESS:**

\_\_\_\_\_  
NUMBER & STREET APT #

\_\_\_\_\_  
CITY STATE ZIP CODE

**Date of Birth:**

<p><b>CONTACT INFORMATION</b> Please include area code on all telephone numbers</p> <p>Cell Phone Number:</p> <p>Home Telephone Number:</p> <p>Email Address:</p>
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<p>Are you a High School Graduate?    Yes    <input type="checkbox"/>    No    <input type="checkbox"/></p> <p><b>EDUCATION</b> Obtained beyond high school</p> <p>Institution Name:</p> <p>Area of Study:</p> <p>Degree/Diploma/Certificate:</p>
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<p><b>EXPERIENCE</b></p> <p>Employer:</p> <p>Position:</p> <p>Specific Job Duties:</p>
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<p><b>EMERGENCY CONTACT</b></p> <p>Name:</p> <p>Relationship:</p> <p>Telephone Number:</p>
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## CONFIDENTIALITY AGREEMENT

DATE: \_\_\_\_\_

I, \_\_\_\_\_, hereby agree that the exam questions and answers, class room lecture information, and any other material that is furnished to me in order to train me to become a Special Inspector (not including published manuals) is copyrighted material and is not to be shared with anyone else for any reason. I agree that these materials and information are for my personal study and agree not to copy, allow to be copied, reproduced, typed, electronically scanned, or electronically stored by myself or by any other person, company, corporation or entity. I agree not to share, lend, or allow this material to be taught to any other persons, company, corporation, or entity. Plans can **NOT** be unstapled or copied in any way.

Unauthorized use of this material could result in Federal copyright violation charges as well as Civil prosecution for damages suffered by the owner of the copyright.

Signed \_\_\_\_\_

Witness \_\_\_\_\_

Witness \_\_\_\_\_