CHAMBERLAIN UNIVERSITY

A signed and dated copy of this addendum must be attached to the academic catalog and enrollment agreement of every Virginia resident enrolled in the Bachelor of Science in Nursing degree program at the Tysons Corner, Virginia campus.

Fall 2022 Enrollment Data				
Education Level	Award Level	Program Name	Tysons Corner	% Population
Undergraduate	Bachelor's	Nursing (BSN)	663	100.0%

2021-2022 Completions/Graduation Data					
Education Level	Award Level	Program Name	Tysons Corner	% Population	
Undergraduate	Bachelor's	Nursing (BSN)	141	100.0%	

NCLEX First Time Pass Rates					
Year	# First Attempts	# Passed	Tysons Corner Pass Rate		
2020	130	118	90.77%		
2021	159	127	79.87%		
2022	148	99	66.89%		

Refunds

Tysons Corner Campus students who withdraw during the add/drop period shall be entitled to a 100% refund for the period. After the end of the add/drop period, tuition refund calculations are based on the Chamberlain refund policy. See academic catalog for Add/Drop Period.

Grievances

Students are strongly encouraged to utilize Chamberlain's complaint policy/grievance process. If a student has exhausted the avenues provided by the institution and the complaint has not been resolved internally, the student may contact the State Council of Higher Education of Virginia (SCHEV), Attn: Private and Out-of-State Postsecondary Education, 101 N. 14TH St., 10th floor, James Monroe Bldg., Richmond, VA 23219, 804.225.2600. https://www.schev.edu/index/students-and-parents/resources/student-complaints

Chamberlain University is Certified to Operate by SCHEV, 101 N. 14th Street, 10th floor, James Monroe Building, Richmond VA 23219, 804.225.2600.

By signing below, I certify that I have been provided access to the institution's electronic or print catalog, bulletin or brochure. I understand that this is a legally binding agreement. My signature below certifies that I have read, understood and agreed with my rights and responsibilities. Further, I certify that I understand the institution's cancellation and refund policies and I understand and agree to these policies.

I have read and understand the information contained in this addendum and that I have received an exact copy.

Student's Name (print first and last name)	Student's Signature	Date	
Advisor's Name (print first and last name)	Advisor's Signature	Date	