Southeastern California Conference of Seventh-day Adventists®
Office of Education

TUITION & FEES – 2024-2025 School Year

Name School:_____

Items	K	1-6	7-8	9-10	11-12
1. Registration Fees:					
2. Monthly Tuition (SDA):					
3. Monthly Tuition (Non-SDA):					
4. **Total SDA Annual Charges:** **(Registration & Tuition)**					

5. Is your tuition on a 9 or 10-month billing cycle? ☐ 9-month ☐ 10-month

6. Percent of family discount for: 2 children _____% 3 or more _____%

7. Is the family discount given for children in other schools? ☐ Yes ☐ No

8. Percent of cash discount for: Semester in advance _____%

   Year in advance _____%

9. What Penalty is assessed for late payments? _____

10. On what date of month is a payment considered late? _____

11. What are your monthly bus charges? _____

12. Percent of family discount for bus? 2 children _____% 3 or more _____%

13. Please add any information not requested above which would shed light on your tuition and fees charges:

_____

_____

_____.

_____
Name of Person Completing this Report

Please submit this form to Cynthia.Garcia@seccsda.org by June 10, 2024.