**SAINT JOSEPH CENTRAL CATHOLIC HIGH SCHOOL**
***FAMILY TUITION CONTRACT***

PARENT'S NAME_____

ADDRESS_____

Names of children enrolled for 2020-2021 school year_____Grade____

_____Grade____

_____Grade____

Parish Association_____, if applicable.

*Also, to qualify for the Catholic tuition rate you must have your Priest sign the In Parish Certification Form, which can be found on line.

**TUITION AND FEE SCHEDULE**
**2020-2021**

***GRADES 9 THROUGH 12***

| **TUITION** | 1 STUDENT | ADD'L STUDENT |
|---|---|---|
| Catholic | $8,700 | $8,200 |
| Other denomination | $9,825 | $9,325 |

**REVERSE RAFFLE TICKET – (non-refundable)**
*Per Family $ 150

**ATHLETIC FEE - (non-refundable)**
*Per Athlete $ 100

**REGISTRATION FEE – (non-refundable)**
*Per Student $ 250 (After March 20 -- $350)

***ALL FEES MUST BE PAID AT TIME OF REGISTRATION AND ARE NON-REFUNDABLE***

**TUITION** (according to schedule, include all children) $_____

**TUITION ASSISTANCE**
1. Diocesan Tuition Assistance (TAP) $_____
2. Parish Assistance _____

**TOTAL TUITION COMMITMENT** $ _____

3. Add registration fee (____ # students x $250) $ _____
4. Add athletic fee (____ # students x $100) $ _____
5. Add reverse raffle fee $ _____

**TOTAL TUITION and FEES** $ _____

## PAYMENT PLAN OPTIONS

| | | | | | |
|---|---|---|---|---|---|
| ***PLAN A** | **Payment in Full – Due on or before July 1st.** | | | | |
| ***PLAN B** | **Semi-Annual; 2 payments, July, 2020/January, 2021** | **Choose date:** | **5th** | **15th** | **20th** |
| ***PLAN C** | **Monthly, 12 payments, begins July, 2020** | **Choose date:** | **5th** | **15th** | **20th** |
| ***PLAN D** | **Monthly, 10 payments, begins August, 2020** | **Choose date:** | **5th** | **15th** | **20th** |

***There is a $40 non-refundable fee charged by FACTS to enroll each school year.**

***There will be a 2.5% administrative fee if you pay by credit card. We accept Master Card or Visa.**

## TUITION ASSISTANCE

**ANYONE REQUESTING FINANCIAL ASSISTANCE MUST FILL OUT THE ONLINE APPLICATION AT WWW.FACTSMGT.COM AND CLICK ON GRANT & AID. YOU MUST ALSO PROVIDE YOUR MOST RECENT W-2 OR TAX RETURN BEFORE BEING CONSIDERED FOR ANY DISCOUNTS.**

**_____ INITIAL HERE TO ACKNOWLEDGE AGREEMENT WITH THE ABOVE REQUIREMENTS FOR ANY TUITION ASSISTANCE OR DISCOUNTS.**

## TUITION REFUND POLICY

To apply for a refund for services not rendered, a signed and dated withdrawal letter must be completed by the parent or legal guardian in the school office.

If you have paid through monthly payments on a tuition budget plan, a signed change order must be filed with the school.

Withdrawal Prior to Sept. 31st will be charged a $65 /day pro-rated tuition. All fees are non-refundable.

If 25% of education days have occurred during the semester of withdrawal, no refund will be given.

I agree to pay tuition and fees according to the payment plan indicated above. I acknowledge that payment must be made on or before due dates. 1% monthly interest will be charged every month my payment is late.

I understand that if tuition is in arrears, or the service hour requirement is not fulfilled (9 per semester) my child will not receive report cards, transcripts, be allowed to take mid-term or final exams, be allowed to graduate, or be eligible to register for the next term. Report cards, transcripts, records, etc. will not be made available to me or to schools, colleges, scholarship applications, or employers until delinquent amount and/or service hour requirement is satisfied.

If circumstances dictate that the child's behavior; and/or the parent/guardian's behavior is determined to be of such a nature to warrant expulsion from St. Joseph Central Catholic High School, all tuition and fees paid to date will be forfeited.

PARENT OR LEGAL GUARDIAN SIGNATURE_____DATE_____

PRINCIPAL'S SIGNATURE_____DATE_____