

TUITION MODIFICATION FORM

Effective Date: _____

Student's Name: _____ Grade: _____

Sibling's Name: _____ Grade: _____

Parent's Name: _____

Mailing Address: _____

Home #: _____ Cell #: _____ Work #: _____

Email Address: _____

REMOVE ACH FEE

EARLY CHILDHOOD ELEMENTARY MIDDLE SCHOOL AFTER SCHOOL PROGRAM BEFORE SCHOOL CARE FINE ARTS INSTITUTE

ADD ACH FEE

EARLY CHILDHOOD ELEMENTARY MIDDLE SCHOOL AFTER SCHOOL PROGRAM BEFORE SCHOOL CARE FINE ARTS INSTITUTE

Additional Comments: _____

Parent's Signature: _____ Date: _____

Finance Signature: _____ Change Update: _____