

Wisconsin Conference of Seventh-day Adventists

2021-2022 EMPLOYEE EDUCATIONAL ALLOWANCE



School Name: _____

Address: _____

School Treasurer:

- Please list children of Wisconsin Conference Employees, including grade, registration fee, monthly tuition and scholarship amount. Monthly tuition should be 1/10 of the total tuition for the school year. This is the summary of students.
- For the second page, you will need one page per employee/parent.
- Once both pages are completed, please mail to the Wisconsin Conference of SDA.

Wisconsin Conference of SDA

Attn: Treasury Department

P.O. Box 100

Fall River, WI 53932

Student Name	Grade	Registration Fee	Monthly Tuition	Educational Allowance 35% (Tuition)



2021-2022 EMPLOYEE EDUCATIONAL ALLOWANCE CONT'D

School Name: _____

Employee's Name: _____

Grade: _____

Child's Name: _____

Grade: _____

<u>Required Fees</u>	<u>Amount</u>
Registration Fee	
Tuition (Year)	
Total Tuition & Fees (Year)	

<u>Required Fees</u>	<u>Amount</u>
Registration Fee	
Tuition (Year)	
Total Tuition & Fees (Year)	

Child's Name: _____

Grade: _____

Child's Name: _____

Grade: _____

<u>Required Fees</u>	<u>Amount</u>
Registration Fee	
Tuition (Year)	
Total Tuition & Fees (Year)	

<u>Required Fees</u>	<u>Amount</u>
Registration Fee	
Tuition (Year)	
Total Tuition & Fees (Year)	

Date

Signature of School Treasurer or Teacher

Child's Name: _____