



FLORIDA DEPARTMENT OF EDUCATION

Office of Independent Education and Parental Choice

325 W. Gaines St., Ste. 1044, Tallahassee, FL 32399-0400
 Fax: 1-850-245-0875 Email: schoolchoice@fldoe.org
 School Choice Information Hotline: 1-800-447-1636



PRIVATE SCHOOL STUDENT FEE SCHEDULE Workforce Education Scholarship Pilot Program

Instructions: For each participating student, complete the first 3 sections of this form and fax or mail to this office.

Private School

School Name _____ Federal Employer Identification Number _____

Street Address _____ City _____ State _____ Zip _____ County _____

Owner Name _____ Owner E-mail _____

Director Name _____ Director E-mail _____

School Phone # _____ School E-mail _____

Supported Employment Services Provider (Employer) _____

Has the Student Fee Schedule been provided to Supported Employment Services Provider? Yes No

STUDENT

Name _____ Date of Birth ____/____/____

Street Address _____ City _____ State _____ Zip _____ County _____

Contact Phone # _____ E-mail _____

Student Fee Schedule

Section 1004.935(5)(d), F.S., provides that for a student to receive the Workforce Education Scholarship participating private schools must provide to the provider of supported employment services all documentation required for a student's participation, including the student's fee schedule, at least 30 days before any quarterly payment is made.

A private school must submit a general fee schedule in order to submit a student fee schedule. Items included in a student fee schedule must be included in the private school's general fee schedule.

Please complete the following student fee schedule section. This will help ensure that all statutory provisions have been met.

Item/Service Provided	Quantity	Cost

Private School General Fee Schedule Submitted By _____ Date _____