



COMMITMENT TO ATTEND

**Declaration of Intent to Attend Christian Unified Schools of San Diego
[To be filled out AFTER student has been ACCEPTED (for I-20)]**

1. By signing below, I _____ intend to attend grade _____
(print student's name)
at one of the schools in the Christian Unified System should the visa be granted.
1.
2.

2. Please enclose the remainder of the **fees**. (Or send a copy by fax if you use a wire transfer.)

International - \$ 3,800.00 grades 7-12 (\$1,100.00 grades K-6 No refund)

Amount _____

You may also pay the **tuition** at this time. (Due before July 31)

Amount _____

\$ 11,352.00 High School

\$ 10,032.00 Junior High

\$ 8,148.00 Grades 1-6

If you wish to pay the **full amount** due, the total being paid is:

Total _____

[Fax or email a copy of any wire transfers to K. Andrews at 1-619-201-8898.]

3. Please choose how to receive the I-20 by **one** of the following:

Mail I-20 to _____

Pick up I-20 by _____

Phone number _____

Email address _____

Signed _____ Dated _____

Send to: Karen Andrews, Ed.D.
PDSO, Christian Unified Schools
2100 Greenfield Drive
El Cajon, CA 92019
kandrews@christianunified.org
FAX 619-201-8898