2025-26 Charter School Independent Auditor Selection Certification Form
San Bernardino County Superintendent of Schools (SBCSS)

Pursuant to E.C. § 41020, the Governing Board of each charter school shall have awarded a contract for the annual 2025-26 audit of the books and accounts of the charter school by April 1, 2026.

Please note, each charter school with its own CDS code is required to submit a separate form. SBCSS must submit the report to the CA State Controller (SCO) for each charter school.

If your charter school is a dependent charter school that is included in the sponsoring district's audit, please disregard this request. The requested information will be obtained from the sponsoring district's submission of this information.

Instructions for Charter Schools with Continuing Contracts:
Because this is a new collection process for SBCSS, for this year only, all charter schools are to submit their audit contracts, even if they are multi-year contracts that have been previously submitted. In future years, charter schools with multi-year contracts will only need to submit an updated annual contract if any amendments have been made and/or the contract term has not exceeded five years. Regardless of a contract covering multiple years, the "Independent Auditor Selection Certification Form" must be completed and submitted to SBCSS annually.

Consolidated Audits: Charter schools that are part of a consolidated audit that includes other charter schools operating in San Bernardino County only need to provide one copy of the audit contract as long as all schools are listed in the approved contract.

If this is a consolidated audit, please list associated charter schools:

If you have any questions, please email sbcss.charters@sbcss.net

* indicates a required field

Submitter Email Address * - Enter email of person submitting this form

Charter School Name *

Charter School Number * - four digit number from CDE

Authorizing District Name *

Name of Audit Firm *

Lead Auditor *

Email for Lead Auditor *

Name of Engagement Partner*

Name of Reviewing Partner*

Audit Firm Address *

Audit Firm City, State, Zip *

Audit Firm Phone * (ex: 123-456-7890)

2025-26 Charter School Independent Auditor Selection Certification
Form San Bernardino County Superintendent of Schools (SBCSS)

Authorized Contact at Charter School for this Action *

Authorized Contact Title *

Authorized Contact Email *

Authorized Contact Phone Number * (ex: 123-456-7890)

Date of Board Meeting in Which Audit Contract Was Awarded *

List The Fiscal Year The Annual Audit Contract Was Awarded For *

If Multiple-Year Contract, check all Fiscal Years Covered. Please select up to 6 choices.

- ☐ 2020-21
- ☐ 2021-22
- ☐ 2022-23
- ☐ 2023-24
- ☐ Other
- ☐ 2024-25
- ☐ 2025-26
- ☐ 2026-27
- ☐ 2027-28

Audit Fee *

Please Select One Option Below *

- ◉ A copy of the executed contract is attached.
- ○ A copy of the executed contract will be forwarded once it is finalized.