

NCHED A-3 (Student Costs), Fall 2008

Institution Name: \_\_\_\_\_

FICE Code: \_\_\_\_\_

IPEDS UnitID: \_\_\_\_\_

	In-State	Out-of-State	Other Required Fees
<b>Part 1. Undergraduate Tuition and Fees</b>			
<b>Undergraduate Tuition</b>			
<b>Undergraduate Tuition</b>			
<b>Required Undergraduate Fees*</b>			
Academic Fee			
Athletic Fee			
Health Services Fee			
Cultural Series			
Student Government			
Student Publications			
Student Union			
Student Activity Fee			
Debt Services Fee			
Educational/Technical Fee			
Book Rental (do not include in total)			
Other Specify			
<b>Total Other Required Fees</b>			
<b>Total Undergraduate Tuition and Fees</b>			
<b>Total Undergraduate Tuition, Academic, and Other Fees</b>			

Completed by: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

\*If the fee below is included in the tuition, leave blank. Otherwise, please fill in the amount in the space provided.

**FICE Code:** \_\_\_\_\_

**IPEDS UnitID:** \_\_\_\_\_

	In-State	Out-of-State	Other Required Fees
<b>Part 2. Graduate and First Professional Tuition and Fees</b>			
<b>Graduate Programs</b>			
Low			
High			
<b>First Professional Programs</b>			
Law			
Dentistry			
Medicine			
Pharmacy			
Vet Med			
Theology			
Kenan Flagler Business School (UNC-CH)			
<b>Part 3. Room and Board Plans**</b>			
<b>Room and Board Plans</b>			
Room Charge (Double occupancy)			
Board Charge (Maximum plan)			
Residential Charge (only if room/board CANNOT be separated)			

**Completed by:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**\*\*List the room rate(s) and board plan(s) offered by your institution. State the total dollar amount for the full academic year (2 semesters or 3 quarters).**