Center for Health Sciences Dental Hygiene Program 1062 Akron Way Denver, CO 80230 Phone: 303.365.8340



ESTIMATE OF PROGRAM EXPENSES

Estimated expenses associated with the dental hygiene program are listed below. **All costs are subject to change without notice.**

Refer to the CCD Tuition and Fees webpage (<u>https://www.ccd.edu/org/cashiers-office</u>) to review tuition and basic fees.

The estimates given below are for **resident (in-state) tuition only, and are based on the current academic year. Tuition is subject to change without notice.** If you are a non-resident of Colorado, please review fees online or email Program Director Paige McEvoy at paige.mcevoy@ccd.edu for additional details.

Summer Semester	
Resident/In-state tuition per credit hour	\$442.70 x 1 credit hours = \$442.70
Colorado Opportunity Fund (COF) stipend	x 1 credit hours = -\$116
CCD Fees MORE INFO	Estimate \$200
Uniforms (scrubs, lab coats), stethoscope, and other related items	\$300.00
Total estimated fees and additional first summer expenses	\$826.70
Fall Semester	
Resident/In-state tuition per credit hour	\$442.70 x14 credit hours = \$6,197.80
Colorado Opportunity Fund (COF) stipend	\$116 x 14 credit hours =-\$1,624.00
CCD Fees MORE INFO	Estimate \$600
Clinic Usage Fee, Malpractice Insurance (fall)	60/credit hour – clinic x 3 = 180
	\$62/credit hour - radiology = \$62
Student Instrument and Supply Kit: \$5,000 - Non-refundable fee	\$5,000
Magnifying loupes (estimated)	\$1,200-1,500.00-this cost is included in the student kit fee
Textbooks (estimated)	\$350.00
Student Chapter American Dental Hygienists Association (SCADHA)	\$85.00
Total estimated fees and additional first fall expenses	\$14,600.80 - \$14,900.80
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YEAR ONE

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Spring Semester	
Resident/In-state tuition per credit hour	\$442.70 x 15 credit hours = \$6,640.50
Colorado Opportunity Fund (COF) stipend	\$116 x 15 credit hours = -\$1,740.00
CCD Fees MORE INFO	Estimate \$650
Clinic Usage Fee, Malpractice Insurance (fall)	60/credit hour – clinic x 4 = 240
	\$62/credit hour – materials lab = \$62
Textbooks (estimated)	\$300.00
Total estimated fees and additional first spring expenses	\$6,152.50
*Estimated Year One Total Costs	\$17,580.00 - \$17,880.00

YEAR TWO

Summer Semester	
Resident/In-state tuition per credit hour	\$442.70 x 6 credit hours = \$2,656.20
Colorado Opportunity Fund (COF) stipend	\$116 x 6 credit hours = -\$696
CCD Fees MORE INFO	Estimate \$350
Textbooks (estimated)	\$200.00
Clinic Usage Fee, Malpractice Insurance (summer)	60/credit hour - clinic x 2 = 120
Total estimated fees and additional second summer expenses	\$2,630.20
Fall Semester	
Resident/In-state tuition per credit hour	\$442.70 x 14 credit hours = \$6,197.80
Colorado Opportunity Fund (COF) stipend	\$116 x 14 credit hours =-\$1,624.00
CCD Fees MORE INFO	Estimate \$650
Clinic Usage Fee, Malpractice Insurance (fall)	60/credit hour – clinic x 6 = 360

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Total estimated fees and additional second fall expenses	:	\$5,868.80
Textbooks	9	\$200
Student Chapter American Dental Hygienists Association (SCADHA)	9	\$85.00

Spring Semester	
Resident/In-state tuition per credit hour	\$442.70 x 13 credit hours = \$5,755.10
Colorado Opportunity Fund (COF) stipend	116×13 credit hours = -\$1,508.00
CCD Fees MORE INFO	Estimate \$600
Clinic Usage Fee, Malpractice Insurance (spring)	60/credit hour - clinic x 7 = 420
Textbooks	\$200.00
Dental Hygiene Board Fees: National and Regional Exams	Estimate \$2,000.00
Total estimated fees and additional second spring expenses	\$7,467.10
*Estimated Year Two Total Costs	\$15,966.10
*ESTIMATED TOTAL PROGRAM COSTS	\$33,546.10 - \$33,846.10

*****I** understand that I am responsible for all tuition, fees and dues listed above, and that these expenses are subject to change without notice. *******

Print name:

___Date: _____

Signature: