

BUREAU of CLINICIAN RECRUITMENT AND SERVICE
 College Cost of Attendance
 DATA COLLECTION WORKSHEET (DCW)

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School Name	
Address	
City / State / Zip	
Discipline / Degree	
Applicant Name	

Year 1	Year 2	Year 3	Year 4
2011 - 2012	2011 - 2012	2011 - 2012	2011 - 2012

Annual Tuition

Resident				
Non-resident		\$ -	\$ -	\$ -

Required Fees (charges directly billed by the school)

Technology Fee				\$ -
Student Activities Fee				
Other (specify below)				
<i>Health Insurance</i>				
<i>Life/Disability</i>				
<i>Performance Assessment</i>				
<i>Examination Fee</i>				
<i>Other</i>				
Total Tuition / Fees:				

Other Related Costs (ORC - not billed by the school)

Books and Supplies				
Uniforms	\$ -		\$ -	\$ -
Lab Costs	\$ -	\$ -	\$ -	\$ -
Clinical Supplies	\$ -	\$ -	\$ -	\$ -
Health Insurance (if not billed by the school)				\$ -
Malpractice Liability Insurance	\$ -	\$ -	\$ -	\$ -
National Boards	\$ -			\$ -
Microscopes	\$ -		\$ -	\$ -
Instruments			\$ -	\$ -
Other (specify below)				
<i>Computer</i>		\$ -		\$ -
<i>Background Check</i>				
<i>Transportation</i>	\$ -	\$ -		\$ -
<i>(specify)</i>	\$ -	\$ -	\$ -	\$ -
Total ORC:				
ANNUAL TOTAL				

Name

Department / Administrative Unit

Title

Email

(Area code) Phone Number

(School Completion/Submittal) Date

Dept. Mailing Address

City / State/Zip

(Area code) Fax Number

Fed Reviewer / Date

), a collection of information unless it displays a currently valid OMB control
1 of information is estimated to average 1 hour per response, including the time
nformation. Send comments regarding this burden estimate or any other aspect
e Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

Total

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