## Data Collection Worksheet Form

\author{

* required field
}

| School | Discipline | Degree |
| :--- | :--- | :--- |
| Capella University | Registered Nurse | Graduate |

Thank you for creating a DCW! The form can be completed in 3 easy steps. Please note that all information must be filled in properly to avoid any processing errors which could result in delayed and/or incorrect payments which may adversely affect the student. The deadline date for submission of this information is 06/16/2017 11:59 PM EST.

## 1. ANNUAL TUITION (2017-2018 AMOUNT)

Please enter in the tuition amount to be enrolled for both an in-state resident as well as an out-of-state resident for an entire ACADEMIC year. Therefore, if your institution uses a semester system; please include the tuition amount to be enrolled in as a full-time student for each semester (summer, fall, and spring semesters (3 semesters)). If your institution uses a quarter system; please include the tuition amount to be enrolled in as a full time student for a fall, winter, spring, and summer quarter (4 quarters).

Annual Tuition Example: if in-state tuition is $\$ 15,000$ for 1 academic year (semester/quarter), please enter $\$ 15,000$ for " 1 st Year Student" and $\$ 15,000$ for each subsequent year.

| 1st Year Student |  | 2nd Year Student | 3rd Year Student | 4th Year Student |
| :--- | :--- | :--- | :--- | :--- |
| Resident * | $\$ 0$ | $\$ 0$ |  |  |
| Non-Resident * | $\$ 0$ | $\$ 0$ | $\$ 0$ |  |

## 2. FEES

Please enter in the fee amount for an entire ACADEMIC year for each fee type. The fee types listed are the only eligible fees for the NURSE Corps Scholarship Program. As institutions may have varying names for the types of fees on the form, if a required fee at your institution does not fit into any of the fee categories noted, please list that fee in the "Other" heading. You will only be allowed to add 1 other fee. Please note that "Other" fees may not be eligible for reimbursement due to NURSE Corps Scholarship Program fee restrictions.

|  |  |  | 2nd Year Student |  | 3rd Year Student |  | 4th Year Student |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Academic Support Services | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Administrative Fee | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Background Check | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Building Use / Campus Use Fee / Facility Fee | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Capstone Course (if required) mandatory preparatory course | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Career Resource Fee | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Computer Use Fee | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Counseling Fees | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Curriculum Fee | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Disability Insurance (if required of all students) | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Drug Testing | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Education Fee | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Graduation Fee - for students in last year of program | \$0 | \$0 |  | \$0 |  | \$0 |  |
| Health Insurance - for students only (if required) | \$0 | \$0 |  | \$0 |  | \$0 |  |

Data Collection Worksheet Form- School Representative Portal

| Health Services Fee and Immunizations | \$0 | \$0 | \$0 | \$0 |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
| Laboratory Fee | \$0 | \$0 | \$0 | \$0 |
| Library Fee | \$0 | \$0 | \$0 | \$0 |
| Malpractice Insurance (if required) | \$0 | \$0 | \$0 | \$0 |
| Material Fees / Nursing Material Fee (if required and does Not include books) | \$0 | \$0 | \$0 | \$0 |
| Matriculation Fee | \$0 | \$0 | \$0 | \$0 |
| NCLEX Review (if required) mandatory preparatory course | \$0 | \$0 | \$0 | \$0 |
| Online Tuition - for a course; not an entire program | \$0 | \$0 | \$0 | \$0 |
| Processing Fee | \$0 | \$0 | \$0 | \$0 |
| Recreation Fee | \$0 | \$0 | \$0 | \$0 |
| Registration Fee | \$0 | \$0 | \$0 | \$0 |
| Student Activities Fee | \$0 | \$0 | \$0 | \$0 |
| Student Association and Union - for campus services; not educational associations | \$0 | \$0 | \$0 | \$0 |
| Student Government | \$0 | \$0 | \$0 | \$0 |
| Student Initiated Fees (if required) - <br> to fund campus programs and services | \$0 | \$0 | \$0 | \$0 |
| Student Services Fee | \$0 | \$0 | \$0 | \$0 |
| Technology Fee | \$0 | \$0 | \$0 | \$0 |
| Testing (if required) - for course advancement | \$0 | \$0 | \$0 | \$0 |
| Transcript Fee | \$0 | \$0 | \$0 | \$0 |
| Transportation (if required) - for campus-wide system only | \$0 | \$0 | \$0 | \$0 |
| University Fee | \$0 | \$0 | \$0 | \$0 |
| Other Fees | \$0 | \$0 | \$0 | \$0 |

## 3. OTHER REASONABLE COSTS (ORCS)

Please enter the ORC amount for an entire ACADEMIC year for each ORC type. The NURSE Corps Scholarship Program only offers ORC amounts for the following three three categories: Books, Clinical Supplies/instruments, and Uniforms.

|  | 1st Year Student |  |  |  | 4th Year Student |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Books | \$0 | \$0 | \$0 | \$0 |  |
| Clinical Supplies/Instruments | \$0 | \$0 | \$0 | \$0 |  |
| Uniforms | \$0 | \$0 | \$0 | \$0 |  |

Please explain any "other" fees in the comments section below.
$\square$ I approve this Data Collection Worksheet

## Existing Comments

There are no existing comments.

## New Comments

## Cancel

## Save

