

SOUTHERN OREGON UNIVERSITY Required Fees
Internal Distribution for 2003-04 Academic Year *Winter & Spring Term only*

| | Tuition | | Energy | Technology | Building | Incidental | Health | Total Charges | |
|------------------------------------|-----------|--------------|-----------|------------|----------|------------|---------|---------------|--------------|
| | Residents | Nonresidents | Surcharge | Fee | Fee | Fee | Service | Residents | Nonresidents |
| | | | | | | | Fee | | |
| <i>Undergraduates</i> | | | | | | | | | |
| Full-Time | | | | | | | | | |
| <i>12-16 Credit Hours</i> | 1,046.00 | 3,936.00 | 0.00 | 50.00 | 45.00 | 144.00 | 99.40 | 1,384.40 | 4,274.40 |
| Part-Time (Degree Students) | | | | | | | | | |
| <i>1 Credit Hour</i> | 89.00 | 89.00 | 0.00 | 28.00 | 23.00 | 57.50 | [99.40] | 197.50 | 197.50 |
| <i>2 Credit Hours</i> | 176.00 | 176.00 | 0.00 | 30.00 | 25.00 | 65.50 | [99.40] | 296.50 | 296.50 |
| <i>3 Credit Hours</i> | 263.00 | 263.00 | 0.00 | 32.00 | 27.00 | 73.50 | [99.40] | 395.50 | 395.50 |
| <i>4 Credit Hours</i> | 350.00 | 350.00 | 0.00 | 34.00 | 29.00 | 81.50 | [99.40] | 494.50 | 494.50 |
| <i>5 Credit Hours</i> | 437.00 | 437.00 | 0.00 | 36.00 | 31.00 | 89.50 | [99.40] | 593.50 | 593.50 |
| <i>6 Credit Hours</i> | 524.00 | 524.00 | 0.00 | 38.00 | 33.00 | 97.50 | [99.40] | 692.50 | 692.50 |
| <i>7 Credit Hours</i> | 611.00 | 611.00 | 0.00 | 40.00 | 35.00 | 105.50 | [99.40] | 791.50 | 791.50 |
| <i>8 Credit Hours</i> | 698.00 | 698.00 | 0.00 | 42.00 | 37.00 | 113.50 | [99.40] | 890.50 | 890.50 |
| <i>9 Credit Hours</i> | 785.00 | 2,952.00 | 0.00 | 44.00 | 39.00 | 121.50 | 99.40 | 1,088.90 | 3,255.90 |
| <i>10 Credit Hours</i> | 872.00 | 3,280.00 | 0.00 | 46.00 | 41.00 | 129.50 | 99.40 | 1,187.90 | 3,595.90 |
| <i>11 Credit Hours</i> | 959.00 | 3,608.00 | 0.00 | 48.00 | 43.00 | 137.50 | 99.40 | 1,286.90 | 3,935.90 |
| Over-Time | | | | | | | | | |
| <i>Each Additional Hour</i> | 87.00 | 328.00 | | | | | | | |

Health Insurance Premium Fee of \$13.40 may be waived with proof of other insurance coverage, this fee is included in the Health Service Fee.

Qualified tuition and fees do not include student health insurance fees for Tax Relief Act reporting.

OHSU Nursing students will be assessed a \$3 needle stick fee in addition to the Health Service Fee.

Note: for additional required fees, refer to Required Study Resource Fees Table.

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Internal Distribution for 2003-04 Academic Year *Winter & Spring Term only*

| | Tuition | | Energy Surcharge | Technology Fee | Building Fee | Incidental Fee | Health Service Fee | Total Charges | |
|------------------------------------|-----------|--------------|---------------------|-------------------|-----------------|-------------------|--------------------------|---------------|--------------|
| | Residents | Nonresidents | | | | | | Residents | Nonresidents |
| <i>Graduates</i> | | | | | | | | | |
| Full-Time | | | | | | | | | |
| <i>9-14 Credit Hours</i> | 2,102.00 | 3,852.00 | 0.00 | 50.00 | 45.00 | 144.00 | 99.40 | 2,440.40 | 4,190.40 |
| Part-Time (Degree Students) | | | | | | | | | |
| <i>1 Credit Hour</i> | 230.00 | 230.00 | 0.00 | 28.00 | 23.00 | 57.50 | [99.40] | 338.50 | 338.50 |
| <i>2 Credit Hours</i> | 464.00 | 464.00 | 0.00 | 30.00 | 25.00 | 65.50 | [99.40] | 584.50 | 584.50 |
| <i>3 Credit Hours</i> | 698.00 | 698.00 | 0.00 | 32.00 | 27.00 | 73.50 | [99.40] | 830.50 | 830.50 |
| <i>4 Credit Hours</i> | 932.00 | 932.00 | 0.00 | 34.00 | 29.00 | 81.50 | [99.40] | 1,076.50 | 1,076.50 |
| <i>5 Credit Hours</i> | 1,166.00 | 1,166.00 | 0.00 | 36.00 | 31.00 | 89.50 | [99.40] | 1,322.50 | 1,322.50 |
| <i>6 Credit Hours</i> | 1,400.00 | 1,400.00 | 0.00 | 38.00 | 33.00 | 97.50 | [99.40] | 1,568.50 | 1,568.50 |
| <i>7 Credit Hours</i> | 1,634.00 | 1,634.00 | 0.00 | 40.00 | 35.00 | 105.50 | [99.40] | 1,814.50 | 1,814.50 |
| <i>8 Credit Hours</i> | 1,868.00 | 1,868.00 | 0.00 | 42.00 | 37.00 | 113.50 | [99.40] | 2,060.50 | 2,060.50 |
| Over-Time | | | | | | | | | |
| <i>Each Additional Hour</i> | 234.00 | 428.00 | | | | | | | |

Health Insurance Premium Fee of \$13.40 may be waived with proof of other insurance coverage, this fee is included in the Health Service Fee.

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