

**UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2019
(Fees shown are for one Semester Only)**

College of Dentistry - Years 1 & 2

	Maintenance Fee	Progam & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Dentistry SGA Fee	Laboratory and Clinical Utilization Fee	Malpractice Insurance Spring Only	In-State Total	Out-of-State Tuition Difference	*Out-of-State Total
Hours											
1	1689	45	12	3	14	30	1600	17	3410	2154	5564
2	3378	90	24	6	28	30	1600	17	5173	4308	9481
3	5067	135	36	9	42	30	1600	17	6936	6462	13398
4	6756	180	48	12	56	30	1600	17	8699	8616	17315
5	8445	225	60	15	70	30	1600	17	10462	10770	21232
6	10134	270	72	18	84	30	1600	17	12225	12924	25149
7	11823	315	84	21	98	30	1600	17	13988	15078	29066
8	13512	360	96	24	112	30	1600	17	15751	17232	32983
9+	15194	400	100	25	120	30	1600	17	17486	19380	36866

College of Dentistry - Years 3 & 4

	Maintenance Fee	Progam & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Dentistry SGA Fee	Laboratory and Clinical Utilization Fee	Malpractice Insurance Spring Only	In-State Total	Out-of-State Tuition Difference	*Out-of-State Total
Hours											
1	1689	45	12	3	14	30	1600	17	3410	2154	5564
2	3378	90	24	6	28	30	1600	17	5173	4308	9481
3	5067	135	36	9	42	30	1600	17	6936	6462	13398
4	6756	180	48	12	56	30	1600	17	8699	8616	17315
5	8445	225	60	15	70	30	1600	17	10462	10770	21232
6	10134	270	72	18	84	30	1600	17	12225	12924	25149
7	11823	315	84	21	98	30	1600	17	13988	15078	29066
8	13512	360	96	24	112	30	1600	17	15751	17232	32983
9+	15194	400	100	25	120	30	1600	17	17486	19380	36866

*Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.
If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount

**UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2019
(Fees shown are for one Semester Only)**

Dental Hygiene (Bachelor)

Hours	Maintenance Fee	Program & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Mal-practice Insurance Fall Only	In-State Total	Out-of-State Tuition Difference	*Out-of-State Total
1	417	45	12	3	14	20	511	417	928
2	834	90	24	6	28	20	1002	834	1836
3	1251	135	36	9	42	20	1493	1251	2744
4	1668	180	48	12	56	20	1984	1668	3652
5	2085	225	60	15	70	20	2475	2085	4560
6	2502	270	72	18	84	20	2966	2502	5468
7	2919	315	84	21	98	20	3457	2919	6376
8	3336	360	96	24	112	20	3948	3336	7284
9	3753	400	100	25	120	20	4418	3753	8171
10	4170	400	100	25	120	20	4835	4170	9005
11	4587	400	100	25	120	20	5252	4587	9839
12+	4994	400	100	25	120	20	5659	4994	10653

*Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

The minimum charge is equivalent to one hour at the semester hour rate.