UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2025
(Fees shown are for one Semester Only)

College of Dentistry - Years 1 & 2

Hours	Maintenance Fee	Program & 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
1	1816	48	12	3	14	30	2700	17	4640	2317	6957
2	3632	96	24	6	28	30	2700	17	6533	4634	11167
3	5448	144	36	9	42	30	2700	17	8426	6951	15377
4	7264	192	48	12	56	30	2700	17	10319	9268	19587
5	9080	240	60	15	70	30	2700	17	12212	11585	23797
6	10896	288	72	18	84	30	2700	17	14105	13902	28007
7	12712	336	84	21	98	30	2700	17	15998	16219	32217
8	14528	384	96	24	112	30	2700	17	17891	18536	36427
9+	16345	425	100	25	120	30	2700	17	19762	20849	40611

***Fall Dental Kits D1 - $6,560 and D2 $9,126; Spring Dental Kits D1 - $6,018 and D2 $1,378**

College of Dentistry - Years 3 & 4

Hours	Maintenance Fee	Program & 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
1	1816	48	12	3	14	30	2700	17	4640	2317	6957
2	3632	96	24	6	28	30	2700	17	6533	4634	11167
3	5448	144	36	9	42	30	2700	17	8426	6951	15377
4	7264	192	48	12	56	30	2700	17	10319	9268	19587
5	9080	240	60	15	70	30	2700	17	12212	11585	23797
6	10896	288	72	18	84	30	2700	17	14105	13902	28007
7	12712	336	84	21	98	30	2700	17	15998	16219	32217
8	14528	384	96	24	112	30	2700	17	17891	18536	36427
9+	16345	425	100	25	120	30	2700	17	19762	20849	40611

***Fall Dental Kits D3 - $4,745 and D4 $1,014; Spring Dental Kits - D4 $160**

*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 FEES ARE DETERMINED BY THE BOARD OF TRUSTEES AND ARE SUBJECT TO CHANGE WITHOUT NOTICE

UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2025
(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	448	48	12	3	14	10	535	448	983
2	896	96	24	6	28	10	1060	896	1956
3	1344	144	36	9	42	10	1585	1344	2929
4	1792	192	48	12	56	10	2110	1792	3902
5	2240	240	60	15	70	10	2635	2240	4875
6	2688	288	72	18	84	10	3160	2688	5848
7	3136	336	84	21	98	10	3685	3136	6821
8	3584	384	96	24	112	10	4210	3584	7794
9	4032	425	100	25	120	10	4712	4032	8744
10	4480	425	100	25	120	10	5160	4480	9640
11	4928	425	100	25	120	10	5608	4928	10536
12+	5373	425	100	25	120	10	6053	5373	11426

***Dental Hygiene Kits $4,834 (1st Year Only)**

**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.