

**THE COLLEGE OF NEW JERSEY  
GRADUATE  
OUT-OF-STATE  
FALL 2016/SPRING 2017**

**PART-TIME (LESS THAN 9 CREDITS PER SEMESTER)**

<u>CREDIT HOURS</u>	<u>TUITION</u>	<u>GENERAL SERVICE / CAPITAL</u>	<u>STUDENT SERVICE</u>	<u>COMPUTING ACCESS</u>	<u>STUDENT CENTER</u>	<u>CARD SERVICE FEE</u>	<u>TOTAL</u>
1/2	560.36	60.12	13.72	8.26	5.42	10.00	657.88
1	1,120.72	120.24	27.44	16.53	10.84	10.00	1,305.77
2	2,241.44	240.48	54.88	33.06	21.68	10.00	2,601.54
3	3,362.16	360.72	82.32	49.59	32.52	10.00	3,897.31
4	4,482.88	480.96	109.76	66.12	43.36	10.00	5,193.08
5	5,603.60	601.20	137.20	82.65	54.20	10.00	6,488.85
6	6,724.32	721.44	164.64	99.18	65.04	10.00	7,784.62
7	7,845.04	841.68	192.08	115.71	75.88	10.00	9,080.39
8	8,965.76	961.92	219.52	132.24	86.72	10.00	10,376.16

**FULL-TIME (9 OR MORE CREDITS PER SEMESTER)**

<u>CREDIT HOURS</u>	<u>TUITION</u>	<u>GENERAL SERVICE / CAPITAL</u>	<u>STUDENT SERVICE</u>	<u>COMPUTING ACCESS</u>	<u>STUDENT CENTER</u>	<u>CARD SERVICE FEE</u>	<u>TOTAL</u>
9	10,086.48	1082.16	246.96	148.77	97.56	10.00	11,671.93
10	11,207.20	1202.40	274.40	165.30	108.40	10.00	12,967.70
11	12,327.92	1322.64	301.84	181.83	119.24	10.00	14,263.47
12	13,448.64	1442.88	329.28	198.36	130.08	10.00	15,559.24
13	14,569.36	1563.12	356.72	214.89	140.92	10.00	16,855.01
14	15,690.08	1683.36	384.16	231.42	151.76	10.00	18,150.78
15	16,810.80	1803.60	411.60	247.95	162.60	10.00	19,446.55
16	17,931.52	1923.84	439.04	264.48	173.44	10.00	20,742.32
17	19,052.24	2044.08	466.48	281.01	184.28	10.00	22,038.09
18	20,172.96	2164.32	493.92	297.54	195.12	10.00	23,333.86
19	21,293.68	2284.56	521.36	314.07	205.96	10.00	24,629.63
20	22,414.40	2404.80	548.80	330.60	216.80	10.00	25,925.40

**HEALTH INSURANCE - ACADEMIC YEAR**

PASS THROUGH ANNUAL CHARGE FOR FULL-TIME STUDENTS WITHOUT PERSONAL INSURANCE

GRADUATE STUDENTS 3,033.00

Note: All graduate full-time students will be initially charged the pass through health insurance charge in the fall semester for the academic year. Full-time students have the opportunity to waive/opt out of this coverage by providing evidence of health insurance coverage to the insurance company by the waiver deadlines established by the college.

OFFICE OF STUDENT ACCOUNTS  
GREEN HALL 119, PO BOX 7718  
EWING, NEW JERSEY 08628-0718

OFFICE: 609/771-2172  
FAX: 609/637-5111  
EFFECTIVE DATE: 7/6/2016  
UPDATED: 7/6/2016