| | | | _ | e - LPN-ADN Sheet 2018 - | | _ | | | | | | |
|---|--|-----------------|-----------|-----------------------------|------------|---------|-----------------|---------------|-------|-------------|----------|----------|
| | Third Semester Nursing | | ense. | Tuition | | Lab Fee | | Textbooks | | WkBks | | Total |
| NUR 2420C | Maternal-Infant Nursing | 4 | \$ | 395.00 | \$ | 22.00 | \$ | 75.90 | \$ | 16.50 | \$ | 509.40 |
| NUR 2310C | Nursing Care of the Child | 4 | \$ | 395.00 | \$ | 62.00 | \$ | 107.10 | \$ | 7.50 | \$ | 571.60 |
| NUR 2520C | Psychiatric Mental Health Nursing | 4 | \$ | 395.00 | \$ | 16.00 | \$ | 72.95 | \$ | 11.00 | \$ | 494.95 |
| | In-State Tuition | 12 | \$ | 1,185.00 | \$ | 100.00 | \$ | 255.95 | \$ | 35.00 | | 1,575.95 |
| | Out-of-State Tuition | | \$ | 4,316.52 | \$ | 100.00 | \$ | 255.95 | \$ | 35.00 | | 4,707.47 |
| Fourth Semester Nursing | | Credit Hours | Ψ | Tuition | <u>; Ψ</u> | Lab Fee | | extbooks | | WkBks | <u>Ψ</u> | Total |
| NUR 2214C | Advanced Adult Care | 11 | \$ | 1,086.25 | \$ | 35.00 | \$ | 120.00 | \$ | 29.00 | \$ | 1,270.25 |
| | In-State Tuition | 11 | \$ | 1,086.25 | \$ | 35.00 | \$ | 120.00 | \$ | 29.00 | \$ | 1,270.25 |
| | Out-of-State Tuition | | \$ | 3,956.81 | \$ | 35.00 | \$ | 120.00 | \$ | 29.00 | \$ | 4,140.81 |
| | Estimated Additional Expenses: | | | • | | | | | | | • | |
| | Florida College Placement Test | | \$ | 5.00 | - | * | Tu | ition: | | | | |
| | Nursing Pre-Admission Exam | | \$ | 40.00 | | | | (Per | Cred | dit Hour) | | |
| | Hepatitis B vaccinations (optional) | | \$ | 170.00 | | | | Ir | า-St | ate Fees | \$ | 98.75 |
| | CastleBranch (Background, Fingerprinting, Drug Screen) | | \$ | 166.50 | | | | Out-o | f-St | ate Fees | \$ | 359.71 |
| | Mantoux / TB test | | \$ | 30.00 | | | | | | | | |
| | Physical Examination | | \$ | 150.00 | | | | | | | | |
| | Supplemental (Optional) Books | | \$ | 600.00 | | | * Fe | es are subje | ect t | to change | | |
| | Uniforms, lab coat, shoes, socks, etc. | | \$ | 185.00 | | | without notice. | | | | | |
| | Misc. Medical Accessories | | \$ | 180.00 | | | 20 | 018-2019 Co | lleg | e Catalog | | |
| | NCLEX Review Course (Optional) | | \$ | 350.00 | | | | | | | | |
| | Graduation Fee | | \$ | 20.00 | | | | s / expenses | | | | |
| | Nursing Pin (optional) | | \$ | 100.00 | | | | ilable as an | | | | er |
| | Photo for licensing exam application | | \$ | 25.00 | | | pre | paration of p | ote | ntial stude | ents. | |
| | NCLEX-RN application fee | | \$ | 200.00 | | | | | | | | |
| | State Licensure Fee (varies by state) | | \$ | 200.00 | | | | | | | | |
| | Total Estimated Additional Expenses | . D | \$ | 2,421.50 | _ | | | | | | | |
| *Total Estimated Program Cost for Florida Resident *Total Estimated Program Cost for Non-FL Resident | | | | 5,267.70 | - | | | | | | | |
| | Total Estimated Program Cost for Non-FL | - Resident | \$ | 11,269.78 | _ | | | | | | | |