

**State of Georgia  
Nonpublic Postsecondary Education Commission**

**Estimated Gross Tuition Report**

If a new institution has not yet operated for a full year, it should estimate amounts for the first twelve months of operation. Actual amounts will be subsequently requested after the first year has been completed and appropriate adjustments made at that time.

Institutions which are located outside of Georgia, and which do not maintain branch campuses or satellite instructional programs in Georgia, should report tuition amounts and enrollment figures **for their Georgia students only**. Included in this category are out-of-state distance education schools and institutions which are authorized for the purpose of advertising and recruiting in Georgia

The institution's President, Director, or other official authorized by the President or Director must certify the completeness and correctness of the data provided on the form.

Name of Institution: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Estimated gross tuition reported below covers the twelve-month fiscal year beginning:

\_\_\_\_\_, 20\_\_\_ and ending \_\_\_\_\_, 20\_\_\_

1. Estimated Gross tuition received.....\$ \_\_\_\_\_

2. Estimated application fees received.....\$ \_\_\_\_\_

3. Estimated Registration fees received.....\$ \_\_\_\_\_

4. Less estimated refunds of tuition, application fees, and registration fees.....\$ \_\_\_\_\_

5. Total estimated tuition and fees minus estimated refunds.....\$ \_\_\_\_\_

6. Estimated enrollment during twelve month period:

Total \_\_\_\_\_

Highest at one time \_\_\_\_\_

7. Certification:

I certify the data provided in this report are true, complete, and correct to the best of my knowledge and belief.

Signature of President, Director, or Authorized Official \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_