

ROSEMAN UNIVERSITY

O F H E A L T H S C I E N C E S
Bursar · NV (702) 968-2072 (702) 968-5675 Fax
UT (801) 878-1032 (801) 878-1460 Fax
bursar@roseman.edu

Registration and Payment Agreement
Pharmacy Program
Class of 2027
Academic Year 2026-2027

P3 Term 1 Due Date	<u>May 25, 2026</u>
Tuition	\$32,800.00
Technology Fee	\$200.00
Student Health Insurance	\$3,768.00
Total Due <u>with</u> Health Insurance	\$36,768.00
Total Due <u>without</u> Health Insurance	\$33,000.00

If waiving the student health plan through the school you must submit your waiver request via the online waiver portal (link to be emailed to you from insurance@roseman.edu) and be granted approval from the Student Affairs Office prior to the waiver deadline stated in the email. If the waiver is denied or you do not complete the online waiver process via the portal as stated above, you will be responsible for paying the health insurance premium.

P3 Term 2 Due Date	<u>November 9, 2026</u>
Tuition	\$32,800.00
Technology Fee	\$200.00
Graduation Fee	\$200.00
Total	\$33,200.00