Program Name: Adult-Gerontological Nurse Practitioner Certificate

Program URL: https://csh.depaul.edu/academics/nursing/graduate/certificates/Pages/program-requirements.aspx

This program is designed to be completed in: 70 weeks, full-time per term, 44 credit hours

Program Costs:
This program’s tuition* will cost $32,340 if completed within normal time. There may be additional costs for living expenses. Estimates for books, supplies and equipment is $700. These costs were accurate at the time of posting, but may have changed.

If you apply for financial aid, your award notice will list the Estimated Cost of Attendance (COA). The COA includes the following: Tuition, Fees, Room and Board, Travel, and Personal expenses. To apply for financial aid, complete the appropriate FAFSA which will be used to determine your eligibility in federal student loans. Visit our website for more cost information: Tuition Rates at DePaul.

* Tuition rates undergo annual review and thus are subject to change in the subsequent year.

Student Loan Debt:
Fewer than 10 students enrolled in this program are financial aid recipients, therefore, we are not required to report student loan debt level.

Licensure Requirements:
The following States do not have licensure requirements for this profession: All states have licensure requirements but the following states do not require national certification as the sole pathway to practice as a nurse practitioner: California, Kansas and New York.

College Score Card:
For more information about graduation rates, loan repayment rates, and post-enrollment earnings about this institution and other postsecondary institutions please click here: https://collegescorecard.ed.gov/

Additional Requirement:
You are required to complete the GE Disclosure Confirmation of Receipt Document found on page two. You can submit the form by using secure document upload, in person, by fax or by mail. The Office of Financial Aid is required by law, enforced by the Department of Education, to collect your signature, certifying that you have received the Gainful Employment Disclosure.
Submission of this form is required:

The Office of Financial Aid is required by law, enforced by the Department of Education, to collect your signature, certifying that you have received the Gainful Employment Disclosure on page 1. This form may be submitted by using our secure document upload website, in person, by fax or by mail (information found in box above).

Acknowledgement Statement

I acknowledge that I have received a copy of the Gainful Employment Disclosure for the Adult-Gerontological Nurse Practitioner Certificate program at DePaul University, as required under CFR 34 668.412(e).

__________________________________  _________________________
Signature  Date