

New Jersey Office of the Secretary of Higher Education

Itemized Check Information Sheet



Date	
Institution Name	
Street Address	
City, State, ZIP	
Phone Number	

Correspondence must be sent via overnight mail to the following address:

Attn: The Office of the Secretary of Higher Education (OSHE)
 Finance Office
 1 John Fitch Plaza, 10th Floor
 Trenton, NJ 08625

Institution Type	In-State Proprietary	Check Number	
Enrollment Range	1001-5000	Bank Number	

Institution Type and Enrollment Range Must Match

Quantity <i>(indicate 1-xyz)</i>	Fee Type <i>(sample: Institution Type- Enrollment Range- Description)</i>	Fee Amount	Total Amount
1	All Institutions-Academic Degree Program Bachelor Degree	\$ 1,000.00	\$ 1,000.00
0	In-State Proprietary-1000 or less-Initial Petition	\$ 7,000.00	\$ -
1	All In-State-1001-5000-Annual Licensure Fee	\$ 500.00	\$ 500.00
	Choose a fee type	\$ -	\$ -
Quantity cannot be Zero (0).	Choose a fee type	\$ -	\$ -
	Choose a fee type	\$ -	\$ -
	Choose a fee type	\$ -	\$ -
	Choose a fee type	\$ -	\$ -
	Choose a fee type	\$ -	\$ -
	Choose a fee type	\$ -	\$ -

\$ 1,500.00
