



CATEGORY III FEE ACTION REQUEST

Department _____

Fee Title _____

Fee Term Begin Date _____ Term _____ Year _____

Action Requested _____ Establish New Fee _____ Adjust Existing Fee _____ Delete/Discontinue Fee

Account Number (if existing) _____ Account Title (if existing) _____

Primary Contact Person

Name Email Ext.

- 1. Specify the materials, services, and support provided to this course through allocated departmental/college funds.

[Empty text box for question 1]

- 2. Specify the "exceptional" instructional materials/services that will be provided to each student with funds generated by charging this fee.

[Empty text box for question 2]

- 3. Why are these materials/services necessary?

[Empty text box for question 3]

- 4. How was the amount of the charge calculated? (Please be specific.)

[Empty text box for question 4]

COURSE INFORMATION (If Applicable)
College
Course Fee Chatfield Acct #
Course Prefix & Number:
Course Title:
Current Fee: \$
Requested Fee: \$
Approved Fee: \$

5. Do students have the option of obtaining these materials/services from another source? If not, why not?

6. How is this cost currently being covered?

7. In the interest of minimizing the impact of new fees on students in any one given semester, would the department consider phasing the fee in over multiple semesters?

If yes, how many semesters?

No

8. Describe the platform provided for students to give their input on the proposed fee action. Please provide any data collected as well as the department's response to the student input data (attach additional sheets if necessary).

Estimated Annual Revenue

Summer	_____	x	\$ _____	=	\$ _____
	(Estimated # Students)		(Proposed Fee)		
Fall	_____	x	\$ _____	=	\$ _____
	(Estimated # Students)		(Proposed Fee)		
Spring	_____	x	\$ _____	=	\$ _____
	(Estimated # Students)		(Proposed Fee)		
Total	_____		\$ _____	=	\$ _____

Fee Expenditures

	Previous	Year 1	Year 2
1) Salaries and Benefits	_____	_____	_____
2) Supplies and Services	_____	_____	_____
3) Accounting Charges (___% of Fees Collected)	_____	_____	_____
4) Other _____	_____	_____	_____
5) Total Estimated Expenditures			

Please note that according to Executive Order 1102, all revenues from miscellaneous course fees should be expended in the year in which they are collected. For information regarding Executive Order 1102 and related topics visit www.calstate.edu/budget/student-fees/

Three Year Fee Revenue & Expense

	Previous	Year 1	Year 2
Revenue			
Expense			
Net			

Signatures (required for submission):

Department Chair	Date
College Dean/Associate Dean	Date
Provost & Vice President for Academic Affairs	Date

Reviews and Approvals (SFAC & VPSAEM office only)

Date received by office of the VP for Student Affairs & Enrollment Management: _____

Date reviewed by Student Fee Advisory Committee: _____

Amendments/Changes made by SFAC: _____

President's Decision

Approved Denied

Approved with these changes

Signature	Date
Lynn Mahoney, Ph.D. President	