SPECIAL INSTRUCTION FEE REQUEST

To: Executive Vice President for Finance and Administration

Date: ___________________

Name of Department: ___________________________________________

Course/Section Number(s):

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Amount to be collected from each student: $_______________

Indicate by checking (✓) the appropriate block if this charge (amount) is per credit hour or a flat rate charge.

[ ] This is per credit hour.
[ ] This is a flat rate charge.

Please PRINT or TYPE the fee description to be printed on the student’s billing (30 character limit).

____________________________________________________________________________

Effective Semester(s): __________ __________ __________ __________

Please check (✓) the appropriate block below:

[ ] This is for the above indicated semester(s) only.
[ ] This is to continue until rescinded, beginning with the above semester, for all semesters or summer terms.
[ ] This is to continue until rescinded, beginning with the above semester for ________________ sessions only. Please check (✓) the appropriate block for the semester(s) or term(s):

[ ] Fall  [ ] Spring  [ ] 1st Summer  [ ] 2nd Summer

Provide a short narrative stating the purpose of the special fee or nature of special activity. (Attach additional page(s) as necessary.)
**SPECIAL INSTRUCTION FEE REQUEST, Continued:**

**BUDGET INFORMATION**

A. Individual who will manage budget (please PRINT or TYPE):

<table>
<thead>
<tr>
<th>Last Name</th>
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Official Phone Number ( ) _______ - _______

B. Banner FOP:

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*(assigned by Student Business Services)*

(If this is a new account, attach a copy of the Budget Revision and New Fund Request Forms.)

C. Budget Estimate: $___________ per year

$___________ per semester

Revenue Estimate:

_________ Number of Students x $___________ (fee) = $___________

Expenditures (estimated):

$_______

$_______

$_______

$_______

TOTAL $___________

____________________________________  __________________________________
Chairperson                          President

____________________________________
Dean  Executive Vice President for
      Finance and Administration

Submit Fee Request to:
Student Business Services
Attn: Director
STOP 6288