Missouri Western State University

Request to Initiate New or Increase Existing Course Fee

___ Proposed New Course Fee    ___ Proposed Change in Existing Course Fee

Please complete a separate proposal for each fee (or set of fees) being proposed by your unit/department.

<table>
<thead>
<tr>
<th>Department/Unit:</th>
<th>Name of Fee:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Person:</td>
<td>Purpose of Fee:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Amount of Fee:</td>
</tr>
<tr>
<td>Email:</td>
<td>Revenue to:</td>
</tr>
<tr>
<td>Course Title:</td>
<td>Flat Fee___</td>
</tr>
<tr>
<td></td>
<td>Per Credit Hour Fee___</td>
</tr>
<tr>
<td></td>
<td>Revenue to:</td>
</tr>
<tr>
<td></td>
<td>PR____</td>
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</tbody>
</table>

*Coordinate with the Registrar’s Office on due dates for activation. For new courses the fee must be approved by July 1 to begin in the Fall semester of the next academic year. For adjustments to existing courses, the fee must be approved by November 1st to begin in the next Fall semester.

**Basis of the fee(s):** How was the fee determined and calculated? Include a detailed estimate of revenue and expense.

______________________________________________________________________________________________________
______________________________________________________________________________________________________

Are there other funds supporting this activity/function? If yes, please list them: ________________________________
______________________________________________________________________________________________________
______________________________________________________________________________________________________

**If an existing fee:** Describe the origin of the fee. When was it started and by whom? Are funds generated by the existing fee utilized for a specific purpose? (Attach documentation.)

______________________________________________________________________________________________________
______________________________________________________________________________________________________

How often is the fee adjusted? ___________________________ When was it last adjusted? _______________________

What process is used to adjust the fee? ______________________________

______________________________________________________________________________________________________

**Recommended for Approval**

Department Chair’s Signature: ___________________________ Date: ______________

Department Chairs should submit the completed request form to the appropriate academic dean for approval. Copies go to the VPFPA, Bursar and Registrar for informational purposes.

Dean’s Signature: ___________________________ Date: ______________

Provost and Vice President of Academic Affairs: ___________________________ Date: ______________

Provost’s office will send approved forms to the VPFPA, Bursar and Registrar for implementation.

**For Use by Business Office**

Course fee changes must be sent to the Registrar to develop appropriate information and timing for implementation of the fee. Note that all student course fees shall be assessed by the Registrar’s Office and collected by the Bursar.

Copies to: Contact Person, Department Chair, Dean, Provost and VPAA, VPFPA, Bursar, Accounting, Admissions, and Registrar

**Set up Complete**

Bursar Date Accounting Supervisor Date

Heider 3-12-10