Course Materials Fees
Establishment and Budgetary Review

ATTACHMENT 1

COURSE MATERIALS FEE REQUEST

The following information is required for the establishment of a new Course Materials Fee or adjustment of an existing Course Materials Fee:

Academic Division: ___________________________________________________
Department: __________________________________________________________
Course Name(s): _______________________________________________________

Department Contact
Name: _______________________________________________________________
Email  _______________________________________________________________
Phone   _______________________________________________________________

1. Which of the following does this request concern? (Please check one)
   Proposal of a New Course Material Fee__________________
   Increase/Decrease to an existing Course Material Fee___________________

2. Provide a brief description of the basis for the proposed or increased fee.
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

3. What is the amount of the proposed fee? _________________________________

4. On Attachment 2, provide a detailed breakdown of the fee calculation proposed for 2005-06, including the estimated cost of materials, number of students in the course and the source of the estimate. If this request is to change an existing fee, complete the 2004-05 Projected Income and Expenses portion as well.

5. Explain how these expenses have been paid in past years if this is a new fee.
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

6. Is the fee mandatory for all students enrolled in the course:_________________
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7. Can students reasonably secure these materials elsewhere? If not, why not?
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

8. Fee Waivers may be granted as an exception. Please specify your Division’s appeal Process.
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

9. Include an approval by the academic Division Dean.

_____________________________________________________________________
_____________________________________________________________________

Approval: Name  Title  Date