

Request to Establish, Renew, or Increase Course Fee Academic Year 2025-2026

School Requesting Fee:	Contact Name and Email:
Proposed Fee:	Is this fee new, a renewal or an increase? If an increase, what percentage?
Course Prefix and Number:	Quarter Effective:
Previous Fee (if any):	Cost Center Worktags:
Have you made a good faith effort to ensure that this is the most cost-effective use of funds for students?Yes No If not, why not?	
Course Frequency:	Expected Enrollment:
Fee Purpose: Provide in as much detail an explanation for fee use, including an itemized list, links and quotes for cost, and estimates for required course components covered by fees, for example - Labs, Studio, Supplies (other than lab), Field Trips, Technology Support, Distance Learning Support, or Other. Attach Additional Documents as needed.	
School Dean Approval Signature	Date
Fiscal & Audit Services Review Signature	Date
ASUWB Review Signature	Date
Vice Chancellor for Academic Affairs Approval Signati	ure Date
Chancellor Approval Signature	Date
Provost Office Approval Signature (as needed)	Date