

**OFFICE OF ENROLLMENT & FINANCIAL PLANNING**

**Fee/Service Charge Approval Request**

**A. FEE / SERVICE CHARGE DESCRIPTION**

Existing or Proposed Fee/Service Charge Title: \_\_\_\_\_

Check one: New \_\_\_\_\_ Revision \_\_\_\_\_ Elimination \_\_\_\_\_ Proposed Effective Date \_\_\_\_\_

Current Rate \$ \_\_\_\_\_ Proposed Rate \$ \_\_\_\_\_ Rate Increase/Decrease \$ \_\_\_\_\_

Estimated Annualized Revenue: \$ \_\_\_\_\_ Existing/Current \$ \_\_\_\_\_

Proposed Collection Point for Fee (e.g. Department or Bursar): \_\_\_\_\_

**B. PURPOSE / JUSTIFICATION:**

**C. ESTIMATED ADMINISTRATIVE / COLLECTION COST:**

