

Special Instruction Fee Request

**Definition:**

The Special Instruction Fee form is used to request a one-time fee associated with a particular course and specific section. The request must include a justification that is subject to the approval by the Office of the Provost and the department chairperson and dean. This is a flat fee. This form should only be used to add a course and section that has not previously charged a fee or to increase a fee.

**Instructions:**

1. **Complete the form and obtain the signature of the chairperson and dean.**
2. **Return the form to the Office of the Provost for approval.**
3. **Student Business Services will email a confirmation to the department when it has been entered in the system.**
4. **If your request is not approved, the form will be returned to the department chairperson.**
5. **Please attach an account summary and justification.**

**FEE INFORMATION:**

1. **Term** (This fee is effective for):
2. **Fee Description** (24 character limit):

1. **Course/Section Number(s)**:

1. **Requested Amount**: (total cost divided by total number of students) $

1. **Justification Narrative** (attach additional documentation if necessary):

* 1. Describe the special instruction to be provided by this fee
  2. What is the total cost for providing the Special Instruction?
  3. How many students will be charged this fee (estimated enrollment)?

**BUDGET INFORMATION (Where the funds from this fee are deposited)**

Department Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FOP Number: \_\_\_\_\_\_\_\_\_\_\_\_\_ -\_\_\_\_\_\_\_\_\_\_\_\_\_\_- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOP must be provided for fee set up. Incomplete form will be returned to department chairperson.**

Fund Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Department Chair (signature) Date Department Chair E-mail

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Dean (signature) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Provost (signature) Date