

UT Knoxville Course Fee Request Form

SECTION 1: Complete for ALL Request

Request Type: New Fee Change in Existing Fee Rate Cancel Fee Cross List Course

Fee Type: Flat Rate Credit Hour Student Program: _____

Other – Please Explain: _____

Fee Name: _____ (limit number of characters including spaces to 25)

Course Number/Title: _____

Area/College: College: _____ Academic Dept.: _____

Proposed/New Fee Rate: Qualified \$ _____ + Non-Qualified \$ _____ = Total \$ _____

Estimated Revenue per year \$ _____ Additional Income (if an increase) \$ _____

Undergraduate Graduate Law Effective Date or Semester/Year _____ Account # _____ GL Code _____

Current Fee Rate: \$ _____ **Date of Last Approved Increase:** _____

<p>Background Information/Fee Justification/Purpose: Identify core products and or services that will be provided from the funds generated by the fee; explain whether the goods/services already being provided, whether those funds will continue to subsidize the requirement and/or the necessity to begin charging for the goods and or services.</p>	
<p>Rationale For Fee Change: Provide the revised detailed justification describing the intended use of the previously approved fee.</p>	
<p>Cost Basis for Fee: Describe the intended outcomes and benefits to the student/fee user expected from the assessment of the fee.</p>	

SECTION 2: Routing/Approval Process

Completed materials must be routed and reviewed as follows:

Department Head: _____

Signature
Print Name
Email
Date

Dean: _____

Signature
Print Name
Email
Date

College Fiscal Officer: _____

Signature
Print Name
Email
Date

Provost: _____

Signature
Date

Alternative individual to be contacted Name _____ Phone _____ Email _____