

# Texas A&M University-Texarkana

## COURSE/LAB FEE REQUEST FORM

Department: \_\_\_\_\_ College: \_\_\_\_\_

Course: \_\_\_\_\_ Cross-listed: \_\_\_\_\_  
(PREFIX, NUMBER, TITLE, CATALOG PAGE NUMBER) (PREFIX, NUMBER, TITLE, CATALOG PAGE NUMBER)

REQUEST IS FOR: New Course \_\_\_\_ Existing Course \_\_\_\_ New Fee \_\_\_\_ or Revised Fee \_\_\_\_

(if revised, current fee: \$ \_\_\_\_\_ Account Number: \_\_\_\_\_ Current Balance in Account \$ \_\_\_\_\_ )

**RECOMMENDED**

\_\_\_\_ Course Fee \$ \_\_\_\_\_ Recommended Effective Date: \_\_\_\_\_

\_\_\_\_ Lab Fee \$ \_\_\_\_\_ Recommended Effective Date: \_\_\_\_\_

**JUSTIFICATION / DETAILED BUDGET FOR USE OF REQUESTED FEE**

**DESCRIPTION OF USE OF CURRENT BALANCE IN FEE ACCOUNT**

**IMPLICATIONS TO LIBRARY, INFORMATION TECHNOLOGY, AND SPACE**

\_\_\_\_\_  
FACULTY

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEAN

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PROVOST/VICE-PRESIDENT FOR ACADEMIC AFFAIRS

\_\_\_\_\_  
DATE

**For Administrative Council Use**

Approved: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Not Approved: \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

Chief Financial Officer: \_\_\_\_\_

Date: \_\_\_\_\_