University: _____   College/School: _____

Department: _____   Program: _____

Both   Graduate   Undergraduate

Resident: _____
                    Proposed Fee

Effective Date of Change: _____
(this field you may enter other option just by typing it in box)

Non-Resident: _____
                    Proposed Fee

Effective Date of Change: _____
(this field you may enter other option just by typing it in box)

Other Applicable Fees in College/School	Resident:	Non-Resident:
Number of programs with a fee within the same college:	_____	_____
Percent of programs with a fee within the same college:	_____	_____
Number of classes within the college with a fee:	_____	_____
Percent of classes within the college with a fee:	_____	_____

Purpose (Please provide a brief statement detailing the purpose of the tuition, including the anticipated expenditures of tuition revenue and benefits the tuition will provide students.)

Justification (Please provide a brief statement on what the proposal is intended to pay for and how much of the costs will be covered by the incremental revenue)

Student Consultation (Please describe the method and outcomes of student consultation)

MARKET PRICING

Institution	Degree	Annual Price		
		Resident	Nonresident	Online

BUDGET

Financial Aid Set Aside (FSA) Amount: _____

Proposed Annual Revenue

Differential Tuition	$	
Number of Students	#	
Total Revenue	=	

Proposed Annual Expenditures

Financial Aid Set Aside	$	
Administrative Service Charge	$	
	$	
	$	
	$	
	$	
	$	
	$	
	$	
Total Program Costs	=	