

MAR 20 2019

Fee Category: Category IV (Misc. campus fees) Category V (Self support program fees)

In accordance with the provisions of the California State University (CSU) Executive Order 1102, the President is delegated the authority for the establishment, oversight and adjustment of Category IV and V fees. To facilitate this process, please provide the information requested below.

Academic Affairs

Required documents for submission of proposal:

Part 1 - Fee Request Form for appropriate fee category, signed by Requestor, Dean/Director and the divisional Vice President

Part 2 - Fee Request Narrative

Part 3 - Financial Data Sheet

MAR 22 2019

I. Request to:	<input type="checkbox"/> ESTABLISH a Campus Fee	<input checked="" type="checkbox"/> ADJUST a Campus Fee
II. Fee Type: (Check each applicable box)	<input type="checkbox"/> Student Fee	<input checked="" type="checkbox"/> Non-Student Fee
III. Name of Fee:	Summer Aquatic Camp	
IV. Current Fee: \$	75	per one week session (4 days)
Proposed Fee: \$	90	per one week session (4 days)
V. Proposed Effective Date:	ASAP (SUMMER 2019)	

Routing Order:

1. Submitted by:	Lawre Maple Dept. Representative Name	<i>Lawre Maple</i> Signature	3/5/19 Date	3853 5941 Phone
2. Approved by:	Gregg Gold Dean / Director Name	<i>Gregg Gold</i> Signature	3-22-19 Date	3740 Phone
3. Approved by:	Dr. Alex Enyedi Vice President Name	<i>Alex Enyedi</i> Signature	4/2/19 Date	3722 Phone
4. Reviewed By:	Sandra Wieckowski Manager, Student Financial Services	<i>Sandra Wieckowski</i> Signature	4-8-19 Date	826-4937 Phone
5. Approved By:	Lisa A. Rossbacher President	<i>Lisa A Rossbacher</i> Signature	4.12.19 Date	X3311 Phone

HUMBOLDT STATE UNIVERSITY

Fee Approved Fee Denied

Comments from the President (if needed):

APR 08 2019

Office of the President

Additional comments from other reviewers:

6. Form with President's signature sent to Manager, Student Financial Services.

For questions regarding fees proposal, call Sandra Wieckowski, 826-4937.

amt 3.20.19
Form updated: 05/11/16

1. Clearly list all assumptions used when creating this proposal.

The Summer aquatic camp provides a service to the local community by offering camp (daycare for parents, swim lesson, water safety) to children in the local area. It also provides teaching opportunities for the HSU students as well as Summer employment. Students provide instruction as camp counselors and serve as lifeguards for the program.

2. Clearly state the expenditures that will be funded by this proposed revenue source.

The main expenditure is student wages. Students are the instructors/camp counselors and lifeguards for the Summer aquatic camp program. The program provides an important source of revenue for the equipment used and maintained by the pool.

3. Clearly state the reason(s) why this fee or fee increase is necessary (include references to executive orders, CA law, etc.)

There have been increases in the minimum wage for student workers of one dollar each year for the past two years. The Summer aquatic camp fee has not been increased since May 2015, prior to my directorship of the HSU pool facility. There is an increase in the salary for the faculty member who serves as the director of the program due to the recent unit 3 collective bargaining agreement.

4. Clearly articulate why the level of fee proposed is the appropriate amount to charge.

The fee increase of \$15 makes our Summer aquatic camp program cost comparable to the other instructional aquatic programs in the local area. We are also increasing the time by one half hour as per requested by parents from previous years. The increased revenue provides an additional ~\$900 in funding to support increased faculty and student wages and purchase necessary equipment.

5. Time line Information:

We hope to have the fee approval for the 2019 Summer aquatic camp as soon as possible to allow for early community sign up of this popular program.

Name of Fee: Summer Aquatic Camp

Current Fee	Proposed fee		
	Year 1	Year 2	Year 3
75	90	90	
Current # of participants	Estimated # of participants that will be assessed this fee		
20	26	26	

	Historical Data (for fee increase proposal)	Prospective Data (2 years for fee increase; 3 years for new fee)		
Fiscal year	2017-18	2018-19	2019-20	

Fee Adjustment Proposal: Enter ONE complete year of historical actual revenue and expenditure data and TWO years of prospective data.
 New Fee Proposal: Enter THREE years of prospective revenue and expenditure data.

Fee Revenue Type:

Summer Aquatic Camp	1,500	2,340	2,340	
Total Revenue: \$	1500	2,340	2,340	

Expenditure Type: (List typical categories of expenditure costs that the fee proposed will cover - salaries, travel, supplies, rental of meeting room, etc.)

Personnel				
Director/ Student Instructors/Lifeguards	1,200	1,200	1,200	
Benefits	500	500	500	
Equipment	400	400	400	
Total Expenditures: \$	2100	2100	2100	
Net (Revenue minus Expenditures)	-600	240	240	

Please note below the chartfield string where the existing revenue fee and actual expenditures are recorded for this program.

FUND	DEPT ID	PROGRAM	CLASS	PROJECT
HM500	D20064	RS518	0	0

K-10