

Student Fee Category: Category II (Mandatory campus fees) Category III (Course fees)

In accordance with the provisions of the California State University (CSU) Executive Order 1102, the President is responsible for assuring that appropriate and meaningful consultation occurs prior to adjusting any Category II or III fees and must consult with the campus fee advisory committee prior to establishing or adjusting these fees.

To facilitate this process, please provide the information requested below.

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

I.	Request to:	<input checked="" type="checkbox"/> ESTABLISH a Campus Fee	<input type="checkbox"/> ADJUST a Campus Fee
II.	Name of Fee:	International Service Learning Program	
III.	Current Fee: \$	_____	per _____
	Proposed Fee: \$	1,000	per Student/semester
IV.	Proposed Effective Date:	December 1, 2023	

Routing Order:

1. Submitted by:	Donyet King <small>Dept. Representative Name</small>	Donyet King <small>Signature</small>	10/6/23 <small>Date</small>	x5517 <small>Phone</small>
2. Approved by:	Dr. Matthew Dean <small>Dean / Director Name</small>	<small>humboldt.protect Jamf Protect CSR Identity</small> Signature	10/9/23 <small>Date</small>	x3159 <small>Phone</small>
3. Approved by:	Dr. Jenn Capps <small>Vice President Name</small>	Jenn Capps <small>Signature</small>	10/10/23 <small>Date</small>	x3722 <small>Phone</small>
4. Approved By:	Sandra Wieckowski <small>Associate Director, SFS</small>	<i>Sandra Wieckowski</i> <small>Signature</small>	11/29/23 <small>Date</small>	x4937 <small>Phone</small>
5. Recommended by:	Dr. Chrissy Holliday <small>Chair - SFAC</small>	<i>Chrissy Holliday</i> <small>Signature</small>	11/29/23 <small>Date</small>	x3361 <small>Phone</small>

Recommend approval Recommend approval w/modification Recommend Denial

Comments from SFAC (if needed)

SFAC voted to support and recommend for presidential approval at 11/16/23 meeting

5. Reviewed By:	Dr. Tom Jackson <small>President</small>	[Signature] <small>Signature</small>	11.30.23 <small>Date</small>	_____ <small>Phone</small>
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Fee Approved Fee approved with modifications Fee Denied

Comments from the President (if needed):

7. Form with President's signature sent to Associate Director, Student Financial Services.

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

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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.

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

I.	Request to:	<input type="checkbox"/> ESTABLISH a Campus Fee	<input type="checkbox"/> ADJUST a Campus Fee
II.	Fee Type: (Check each applicable box)	<input type="checkbox"/> Student Fee	<input type="checkbox"/> Non-Student Fee
III.	Name of Fee:	_____	
IV.	Current Fee: \$	_____	per _____
	Proposed Fee: \$	_____	per _____
V.	Proposed Effective Date:	_____	

Routing Order:

1. Submitted by:	_____	_____	_____	_____
	Dept. Representative Name	Signature	Date	Phone
2. Approved by:	_____	_____	_____	_____
	Dean /Director Name	Signature	Date	Phone
3. Approved by:	_____	_____	_____	_____
	Vice President Name	Signature	Date	Phone
4. Reviewed By:	Sandra Wieckowski	_____	_____	826-4937
	Associate Director, SFS	Signature	Date	Phone
5. Approved By:	Dr. Tom Jackson	_____	_____	_____
	President	Signature	Date	Phone

Fee Approved Fee Denied

Comments from the President (if needed):

Additional comments from other reviewers:

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

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

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

The cost based on 15 students traveling to San Miguel de Allende, Mexico. If there are fewer students who attend, the cost would be greater, and less if there are more students.

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

All travel expenses will be covered, including airfare, accommodations, in country transportation, tour/activity costs, program materials, and some meals.

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

International programs typically require a course fee to supplement the costs associated with students traveling abroad.

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

The proposed fee is to cover direct expenses for students traveling to Mexico.

5. Time line Information:

We have just begun recruiting for the program.
The deadline to apply: November 13, 2023
Application review completed by: November 17, 2023
Deadline to commit with non-refundable \$250 deposit: December 1, 2023
Complete Registration and Fees: December 15, 2023

Name of Fee: ISLP San Miguel de Allende, MX Course Fee

Current Fee	Proposed fee		
	Year 1	Year 2	Year 3
	1000	1200	1200
Current # of participants	Estimated #of participants that will be assessed this fee		
	15	20	20

Fiscal year	Historical Data (for fee increase proposal)	Prospective Data (2 years for fee increase; 3 years for new fee)		
		2023	2024	2025

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:

Student Fee		1000	1200	1200
AS (\$500) / Academic Affairs (TBD)		1725	1800	1800
Total Revenue: \$	0	2725	3000	3000

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

Airfare		1000		
Airport Transportation		120		
Local Transportation		70		
Accommodations		1000		
Meals		200		
Insurance		150		
Field Trips		25		
Supplies		100		
Incidentals/Tips		60		
Total Expenditures: \$	0	2725	0	0
Net (Revenue minus Expenditures)	0	0	3000	3000

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
HMCMP	TL501	D20001	29024	00000