

California State University, Sacramento
2025 - 2026
Fee Proposal for Student Fee Advisory Committee Review

Name of Fee: _____ Dept ID: _____

Course Number (if applicable) _____

Check Fee Category:

☐ **Category II, Mandatory Fee**

☐ **Category III, Materials & Services, Course Fee**

If proposed fee will encompass similar expenses for multiple courses, please list courses and amounts under one proposal.

Type of Proposal	Submission Dates/Deadlines
Category II Mandatory Fees	Oct 1, 2025 – Nov. 10, 2025
Category III, Course Fees	Oct 1, 2025 – Feb. 9, 2026

Proposals submitted after these dates will be returned and new proposals must be submitted during the 2026/2027 proposal period. The Dean/Program Manager and Provost/VP may request the Committee review late proposals on an exception basis. Early submissions are encouraged. **Please submit completed form with all signatures to Jeanne Brewster at either brewster@csus.edu or Sacramento Hall, Room 259, MS 6040. Adobe sign is allowed.**

Proposed Fee Action:

<p><input type="checkbox"/> <i>Establish a new fee</i> of \$ _____ Please complete Appendix A and D</p> <p><input type="checkbox"/> <i>Change an existing fee.</i> Current amount of the fee \$ _____ Fund ID: _____</p> <p style="margin-left: 20px;"><input type="checkbox"/> – Increase the fee to \$ _____</p> <p style="margin-left: 20px;"><input type="checkbox"/> – Decrease the fee to \$ _____</p> <p style="margin-left: 20px;">Please complete Appendix B and D</p> <p><input type="checkbox"/> – <i>Eliminate a fee</i> Fund ID: _____</p> <p style="margin-left: 20px;">Please complete Appendix C</p>	<p>Financial Services Personnel Only</p> <p>Established: _____</p> <p>Most Recent Change: _____</p> <p>Most Recent Audit: _____</p>
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Contact #: _____ Email Address: _____

Reviewed/Approved: *I recommend approval of the proposed fee action.*

Requestor:	Signature (above)	Printed Name	Date
Department Chair:	Signature (above)	Printed Name	Date
Dean/AVP:	Signature (above)	Printed Name	Date
Provost/VP:	Signature (above)	Printed Name	Date

Student Fee Proposal
Appendix A: Establish a Fee - Rationale for the Fee

Name of Proposed Fee: _____

Department Name: _____ **Proposed Fee Amount:** _____

Please provide all of the following.

Failure to provide all information requested could result in an automatic rejection of the proposal.

Is the course required for graduation in the major? ☐ YES ☐ NO

Field Trip Fees (Category III):

☐ Students responsible for transportation to site ☐ Transportation is provided to students

Fee Specifications: Explain how the fee funds will be used – what specific materials or services will they provide

NOTE: Student Fees can not cover payroll, food, housing, mileage, or other benefits to faculty, staff, or student workers. Some exceptions apply. Contact Jeanne Brewster (brewster@csus.edu) for more information

NOTE: Category III fees-materials must be **consumable** and provide **exceptional** instructional materials, services or use of facilities (for further details please refer to the California State University Student Fee Policy).

Previous Funding: Explain what efforts and resources have been previously used to cover the materials or services

Student Benefit: Outline how the materials/services benefit the student

Required Attachments:

- Course Description
- Attach map(s) reflecting travel from campus to possible/likely location(s) – *Field Trip Fees only*

Student Fee Proposal
Appendix B: Changing an Existing Fee - Rationale

Name of Existing Fee: _____

Please provide all of the following.

Failure to provide all information requested could result in an automatic rejection of the proposal.

What changes are requested:

☐ Increase/Decrease Fee Amount ☐ Change Fee Specifications, language, or use

Is the course required for graduation in the major? ☐ YES ☐ NO

Field Trip Fees (Category III):

☐ Students responsible for transportation to site ☐ Transportation is provided to students

Fee Change Rationale: Explain why the change is warranted – what has happened to change the fee amount or the way in which the funds will be utilized

NOTE: Student Fees can not cover payroll, food, housing, mileage, or other benefits to faculty, staff, or student workers. Some exceptions apply. Contact Jeanne Brewster (brewster@csus.edu) for more information

NOTE: Category III fees-materials must be **consumable** and provide **exceptional** instructional materials, services or use of facilities (for further details please refer to the California State University Student Fee Policy).

Student Benefit: Outline how the change benefits the student

Required Attachments:

- Course Description
- Attach map(s) reflecting travel from campus to possible/likely location(s) – *Field Trip Fees only*

Student Fee Proposal
Appendix C: Eliminating an Existing Fee - Rationale

Name of Existing Fee: _____

Please provide all of the following.

Failure to provide all information requested could result in an automatic rejection of the proposal.

Is the course required for graduation in the major? ☐ YES ☐ NO

Elimination Rationale: Explain why the fee is being eliminated – what has happened to make the fee no longer necessary

Alternate Funding: Outline plans for alternate funding. If funding not needed, explain why

Student Fee Proposal
Appendix D: Fee Revenue/Expense Projection

Name of Proposed/Existing Fee: _____

Department Name: _____ Proposed Fee Amount: _____

Note: The projected revenue must be at least \$500 per year. In accordance
with Executive Order 1054, the annual projections below will be multiplied
by two to reflect a two year projection.

ANNUAL PROJECTIONS

REVENUE PROJECTIONS

Cost item or category	Proposed Fee (nearest whole \$)	#Students/ Term	#Terms/ Year	Estimated Revenue
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Subtotal				_____
2 Year Revenue Projection				_____

EXPENDITURE PROJECTIONS

Cost Item or category	Cost/Item	# Items	Estimated Expense
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Subtotal			_____
2 Year Expense Projection			_____
2 YEAR NET			_____