



Membership Fee Request

Form must be approved at least 6 months in advance of Effective Date

Name of Membership Fee

Revision to an Existing Fee

Proposed Old/Revised Fee Amounts

Establish a New Fee

Proposed New Fee Amount

Effective Date

This fee will be (choose one): Fixed Variable *(If variable, please provide details with attached documentation.)*

JUSTIFICATION for new fee
or to revise existing fee:

How will this fee be collected
and what will the revenue be
used for?

Revenue Account Code associated with fee (if applicable):

This fee will be reflected in (choose one):

- Existing Index
 New Index

Index Number

- Statement of Estimated Revenues & Expenditures is attached (REQUIRED)
 Additional documentation is attached *(additional documentation as necessary to justify proposed fee)*

Name of Requestor

Phone #

Requestor's Signature

Date

Organization / Department Name

Forms may be submitted to Jessica Gilland, Office of the Provost (745-4027)

Date received by Provost's Office _____ Approved / Denied (Circle One)

Authorizing Signature _____ Date _____