



## AY 2018-2019 Non-Mandatory Fee Increase or New Fee Proposal Form

Institution:	Contact person if there are questions:
Contact email address:	Proposed effective date of new/increased fee:
Type of fee:  Other, please specify:	
Name of fee (as it is/will be listed in the catalog):	
Statutory authority for collecting this fee:	
Current fee rate (if new enter \$0):	Charge basis:
Proposed rate:	Date of last increase (if new leave blank):

Briefly describe your rationale for requesting a new or increased non-mandatory fee, including the specific use of the fee revenue. If proposed increases are due to an increase in the costs of supplies equipment, or vendor services (e.g. food service providers) please provide relevant supporting documentation.



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Estimate the annual number of students impacted by this fee and describe the student population.

In pricing the requested fee, please list and attach any supporting evidence of market analysis and comparison of the fee to other peer or comparable regional institutions.

**Number of Supporting Documentation Pages Attached:**

**Signature of President** \_\_\_\_\_