Palm Beach State College  
Special Fee Assessment Worksheet

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Course Number** | |  | **Submission Date** (m/d/yyyy) | | |  | | |
|  |  | | | | | | | | |
|  | **Course Title** |  | | | | | |  |  |
|  |  | | | | | | | | |
|  | **Effective Term course fees will be initiated/revised** (yyyy-t) | | | |  |  | | | |
|  |  | | | | | | | |  |
| **Fee Category Fee** | | | | | | | | | **Amount** |
|  |  | | | | | | | |  |
| 1. | Science or health lab/clinical with chemicals, organic or other consumable supplies. | | | | | | | |  |
|  |  | | | | | | | |  |
| 2. | Nursing or other health science class with specialized tools and supplies required for skills/ competencies. | | | | | | | |  |
|  |  | | | | | | | |  |
| 3. | Classes taught in computer labs with standard and/or specialized software, toner or supplies. | | | | | | | |  |
|  |  | | | | | | | |  |
| 4. | Regular classroom course with intermittent instructions/use of computer lab. | | | | | | | |  |
|  |  | | | | | | | |  |
| 5. | Technical/mechanical lab or studio with specialized tools or equipment. | | | | | | | |  |
|  |  | | | | | | | |  |
| 6. | Technical/mechanical course with specialized tools, supplies, or other consumable items. | | | | | | | |  |
|  |  | | | | | | | |  |
| 7. | Distance Learning course with software or other specialized delivery costs. | | | | | | | |  |
|  |  | | | | | | | |  |
| 8. | Individual applied lessons in the performing arts. | | | | | | | |  |
|  |  | | | | | | | |  |
| 9. | Computer networking, electronics or specialized technical class with extraordinary software and/or hardware costs. | | | | | | | |  |
|  |  | | | | | | | |  |
| 10. | Contracted fee paid by PBSC on student behalf. \* | | | | | | | |  |
|  |  | | | | | | | |  |
|  | **Fee Calculation Method** (itemize specifics of cost that initiated request for fee): | | | | | | | | |
|  |  | | | | | | | | |

\*To add or revise Medical Accident and/or Standard Liability fees, fill in the estimated fee under #10 contracted fee. Indicate Medical Accident and/or Standard Liability under fee calculation. In addition, provide the following information below.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Maximum number of students **w/out duplication:** | | | | | Per most active semester: | | |  | | **OR** | | Annually: |  |
| Course Description: |  | | | | | | | | | | | | |
| Contact Information: | | Name: |  | | | Phone: |  | | Email: | |  | | |
| Justification for special fee change: | | | |  | | | | | | | | | |

\*Once submitted, this information will be forwarded to the Palm Beach State Safety and Risk Specialist ([rizzov@palmbeachstate.edu](mailto:rizzov@palmbeachstate.edu))

**Procedure:**Special Fee Initiation or Change **with** Curriculum Action-Fill in form and submit along with course curriculum form packet to Academic Services Academic Coordinator ([spaing@palmbeachstate.edu](mailto:spaing@palmbeachstate.edu)). It will be submit to Risk Management for assessment (if necessary) and the VPAA for approval. Once approved, the fee will be added to or updated in the Course Dictionary and the Special Fee Database.

Special Fee Change **without** Curriculum Action-Fill in form and submit to Academic Services Curriculum Specialist ([mcgannm@palmbeachstate.edu](mailto:mcgannm@palmbeachstate.edu)) The form will be submitted to Risk Management for assessment (if necessary) and to the VPAA for approval; then fees will be updated in the Course Dictionary and the Special Fee Database. 7/2017gs