

Personal Details 

*Applicant First Name:

*Applicant Last Name:

*Email Address:

*Phone Number:

Proposal Details 

*Proposal Title:

*Academic Program:

*Course Name:

*Course Number:

*Course Description:

<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	Source
<input type="text"/>	<input type="text"/>				
Styles 	Format 				
Words: 0/1000, Characters: 0/10240					

*Course Prefix and Number for cross-listed courses:

<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	Source
<input type="text"/>	<input type="text"/>				
Styles 	Format 				

Words: 0/1000, Characters: 0/10240

***Does this course fulfill a general education requirement?:**

***Does this course fulfill an upper division general education requireme the major?:**

***Is this a new course?:**

***If new, when should this course fee be effective?:**

***If not new, when was the course first offered (i.e. spring 2010)?:**

***Are there required books for this course?:**

***How many books are required and what is the estimated cost?:**

<input type="text"/>	▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	Source
<input type="text"/>	<input type="text"/>				

Words: 0/1000, Characters: 0/10240

***Is a copy (copies) of the book(s) available in the Library for check out?:**

***Are there other costs associated with this course?:**

If there are other costs associated with this course, please provide that information.:

*Fee information (select one):

If you are requesting a change in fee amount, what is the current fee amount?:

Fee Range Options:

Fee Amount Requested:

*Please provide the GL (Department Accounting String) for where the fee revenue should be deposited (for example: 501110-GD920-XXX(department number)).):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Source	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Styles	Format	<input type="text"/>	<input type="text"/>

*Please provide non-technical description of your items/request and specific information on how this course fee will be used (i.e. supplies and materials, field trip or international travel). What activities will students participate in and why is this important to further their learning?:

Words: 0/1000, Characters: 0/10240

*Please provide information on how the previous fee was utilized and why there is a need to increase or decrease the current fee.:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Source
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Styles	Format	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Words: 0/1000, Characters: 0/10240

Upload Files ▼

***Cat. III Fee Budget Request**

*** indicates required**

Please attach a complete budget, **either** a Cat. III Fee Budget Request template for Non-Travel or Travel.

***File Input:** No file chosen

Cat. III Fee Request Additional File

Please upload any additional file

File Input: No file chosen

Cat. III Fee Request Additional File

Please upload any additional file

File Input: No file chosen

Review and Recommendations ▼

Please make sure to route your application to the appropriate reviewers.

1. First email address/reviewer should be Kirk England (kirk.england@csuci.edu).
2. Second email address/reviewer should be your Program Chair.
3. Third email address/reviewer should be your Program Dean.
4. Fourth email address/reviewer should be the Provost (elizabeth.say@csuci.edu).

Please be very careful entering the correct email address to avoid delays.

The SFAC will only consider proposals that have gone through the entire review process and are submitted by the deadline.

*** Kirk England**
(kirk.england@csuci.edu):

*** Program Chair:**

*** Program Dean:**

*** Provost**
(elizabeth.say@csuci.edu):

Save or Submit Your Application

Click the Save as Draft button if you would like to return later to complete your application (below left). Click the Submit Application button when you are ready to submit your application (below right).

Add Other Email Addresses for Notifications

Use the form below to have other email addresses included on all communications from the competition system.

Enter recipient(s) email address(es):

Separate email addresses with commas

Save as Draft

Submit Application