

Year-End Report of Program Fee or Differential Tuition Revenue FY

Submit to the Senior Vice Provost for Academic Affairs by October ##, 20##

Please use a separate form for each program fee or differential tuition.

| | | | | |
|--|--|---------------|-----------------|--------------|
| Date Submitted: | College: | | | |
| Program: | Program Fee <input type="checkbox"/> Differential Tuition <input type="checkbox"/> | | | |
| Graduate <input type="checkbox"/> | Undergraduate Upper Division <input type="checkbox"/> Undergraduate Lower Division <input type="checkbox"/> | | | |
| Amount per Student Per Semester: | Amount Per Student Credit Hour: | | | |
| Applicable Shell Code(s) or Account Number(s): | | | | |
| Attach the UAccess Income & Expense Report and Assets, Liabilities & Fund Balance Report and any supplemental reports used to complete the Sources and Uses fields below. | | | | |
| Sources of Program Fee or Differential Tuition Revenue: | | | | |
| General Categories of Fee Sources | Fall & Spring | Summer | Outreach | TOTAL |
| Gross Amount Collected for FY##### | | | | |
| Beginning Fund Balance <i>Ending Balance from Prior Fiscal Year</i> | | | | |
| Total Sources Available for FY##### | | | | |

| | | | |
|--|---------------------------|------------------|------------------------|
| Uses of Program Fee or Differential Tuition Revenue (Includes Summer and Outreach): | | | |
| General Categories of Fee Uses | Sub-Object Code(s) | \$ Amount | % of Total Uses |
| Financial Aid Set Aside <i>Amount Transferred on Sub-Object Code (Enter this amount on Page 2.)</i> | FAS | | |
| Tuition Waivers <i>Amount Transferred on Sub-Object Code</i> | WAV | | |
| Administrative Charge (Include college administrative charge.) <i>Amount Transferred on Sub-Object Code</i> | AF | | |
| Personnel Services (Include ERE) <i>Faculty, Instructors and Support Staff</i> | | | |
| Operational Expenses <i>Program-Related Equipment, Software, etc.</i> | | | |
| Student Services <i>Student Organization Activities, Student Travel Grants, etc.</i> | | | |
| Other (Include other broad categories as needed. Please provide explanation if appropriate.) | | | |
| Total Uses for FY##### Sum of above rows | | | |
| Difference between Sources and Uses* <i>Ending Fund Balance</i> | | | |
| *If over 10% of total revenue, please explain. | | | |

Supplemental Information

Financial Aid Set-Aside

Attach the UAccess *Income & Expense Report* and *Assets, Liabilities & Fund Balance Report* for the Financial Aid Set-Aside Account used to complete the Sources and Uses fields below.

| Line | | \$ Amount | % of Total Use |
|------|--|-----------|----------------|
| 1 | Beginning Fund Balance in Financial Aid Set-Aside Account | | |
| 2 | Amount of Financial Aid Set-Aside <i>(from Page 1)</i> | | |
| 3 | Amount Distributed as Financial Aid | | * |
| 4 | Current Year Fund Balance <i>(Line 1 + Line 2 – Line 3)</i> | | |

**Line 3 divided by the sum of Line 1 + Line 2*

Narrative

Briefly describe the ways in which the program fee or differential tuition was used during this fiscal year to support the purpose of the fee. Describe any differences in spending this year from the most recently ABOR-approved program fee or differential tuition for this program.

I certify that:

- (a) The above statement of program fee or differential tuition usage is accurate;
- (b) Program fee or differential tuition revenues have been used appropriately as described in the proposal approved by ABOR, in accordance with all applicable State, ABOR and University policies; and
- (c) This information is shared with student leaders in the unit.

| | |
|--|--------------|
| Name & Title of Program Unit Business Manager Name: | Date: |
| Signature of Program Unit Business Manager: | |
| Program Unit Head or Director Name: | Date: |
| Signature of Program Unit Head or Director: | |
| College Dean Name: | Date: |
| Signature of College Dean: | |