



The University of Georgia

Bursar's Office New Application for Lab/Supply Fee

School/College/Unit _____

Department _____

Program _____

Contact Information:

Name of person completing this form _____

Campus address _____

Campus Phone Number _____

E-mail address _____

In order to use this application, the lab or supply fee must meet the criteria established in the policy for Lab/Supply Fees. This policy is located at <http://www.uga.edu/provost/polproc/aapm/gp/gp047.htm> (4.07-13). A Lab/Supply Fee budget is also required. This form can be found at www.bursar.uga.edu (click on Lab and Supply Fee)

Requested amount to be charged per student \$ _____

List prefix, course numbers and course titles for all courses that will charge this fee:

Course	Semester Offered	Account Number *
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

** Please enter the account number the funds will be deposited into each time a charge is received into the Student Account System. This happens as the students register for the course. This account MUST be balanced with the reports received from the Bursar's Office each term.*

Individual Responsible for Reconciling Accounts Listed Above:

Name: _____ Phone: _____ E-mail: _____

