

## Category II - Request To Modify or Cancel An Existing Fee

#### General Information

Department / College ASI/USU (Dept ID: )

**Division** SSD

Fee Name Student Body Center Fee

Purpose of the Fee Operation of University Student Union and Student Recreation & Wellness

Center

Detailed Fee Description

Reason for Changing Referendum-required inflationary CPI Adjustment

Effective Date Summer 2016

#### Contact Information —

Name Sylvana Cicero

Contact Phone: 57871, Email: sylvana.cicero@csulb.edu

### Request Status —

Date Requested 2/16/16

Last Modified 2/16/16

Request ID 303

**Account Number** 

**Fund Code** 

Status In Review (Bursar)

# Calculation of Fee Level —

Personnel	Services	Cost
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	Last Year	Min (Year 1)	Max (Year 2)
Salaries and Wages	2133837	2133837	2133837
Temporary Help Cost			
Student Assistants Cost	1714829	1916582	1916582
Staff Benefits Cost	1233383	1356721	1492393
Other Personnel Services Cost			
Supplies and Services			
Tangible Consumable Materials	1229081	1229081	1229081
Services	1838583	1927697	2004603
Insurance	103439	103439	103439
Rentals	14000	14000	14000
Other Supplies and Services	466333	516333	566333
Other Costs			
Any Other Costs	6314218	6432785	6432785
Description	Debt Service, mandatory reserve contributions, and Chancellor		
Total Costs (A)	\$ 15047703	\$ 15630475	\$ 15893053
Number of Students/Year (B)	77906	77772	78080
Calculated Cost per Student (C) = A / B	\$ 193	\$ 201	\$ 204
Current Fee per Student (D)	\$ 179		
Increase/Decrease in Fee (E) = C - D		From \$ 22	To \$ 25

Recommended Fee \$ 4/semester

-Authorization to Submit Reques	t	
Division VP/Appropriate Admin.		Signature: Date:/
Division AVP/College Dean	Dr. Jeff Klaus	Signature: Date: 2/17/16
Department Chair/Manager	Sylvana Cicero	Signature: Date: 2-16-74
ASM	Richard Haller	Signature: Date: 2-17-16