Infinite Campus Fee Request Form

School Name	
Fee Name (30 max)	
Fee Description (50 max)	
Fee Amount (if variable, leave blank)	
Account where funds will be receipted	
Fund	
SCC	

Fee Details

Choose one		Description	Details
Yes	No	Assessed Only Once	If this fee can only be charged to a student one time, choose Yes
Yes	No	May Be Exempted	If this fee could be exempted for a student, choose Yes
Yes	No	May Be Adjusted	If this fee could be adjusted for a student, choose Yes
Yes	No	Variable Rate	If this fee amount can vary (i.e. lost library book), choose Yes. If the fee is a fixed amount, choose No.
Yes	No	Optional	If this fee is optional (i.e. Yearbook), choose Yes.

Requested By: _____

Building Principal: _____

For Treasurer's Office Use Only:	
Fee Name	
Charge Code	
Approved By	