

University of Maryland

Office of the Bursar

FAX # (301) 314-9098

Campus Address: Accounting Department 1110 Lee Building College Park, MD 0742

COURSE CHARGE PROCESSOR (CCP) FORM

Initiation Form

Department/Unit: _____

Effective Term-Year (yyyy-term) : _____

Action Type (Pls cross): Add Revise Delete New

Add/Revise/Delete for existing charge (TCode). For New, a newly approved fee, Dept/Unit provides KFS and Bursar assigns Tcode.

CCP Course Specification:

Charge Code (TCode): _____ KFS (AccountNo-ObjectCode): _____

Charge Code Name: _____

Charge Amount: _____ per credit fixed rate

Purpose: Please be specific with rules such as course, majors, sections, waivers, etc in applying the charge amount.

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For action type Revise or Delete, please paste/copy original CCP Course Specification or attach a separate document.

Requested by: _____

Date: _____

Unit/Department Head: _____

Date: _____