

SPACE UTILIZATION REQUEST

Requests must be submitted no less than **6 months** before space is to be occupied.

Requests that may involve the Division of the State Architect (DSA) must be submitted a minimum of **12 months** before space is to be occupied.

Requester Name:

Email:

School/Department:

Phone Number:

What campus is space being requested at:

East

West

What building and room number is space being requested at: _____

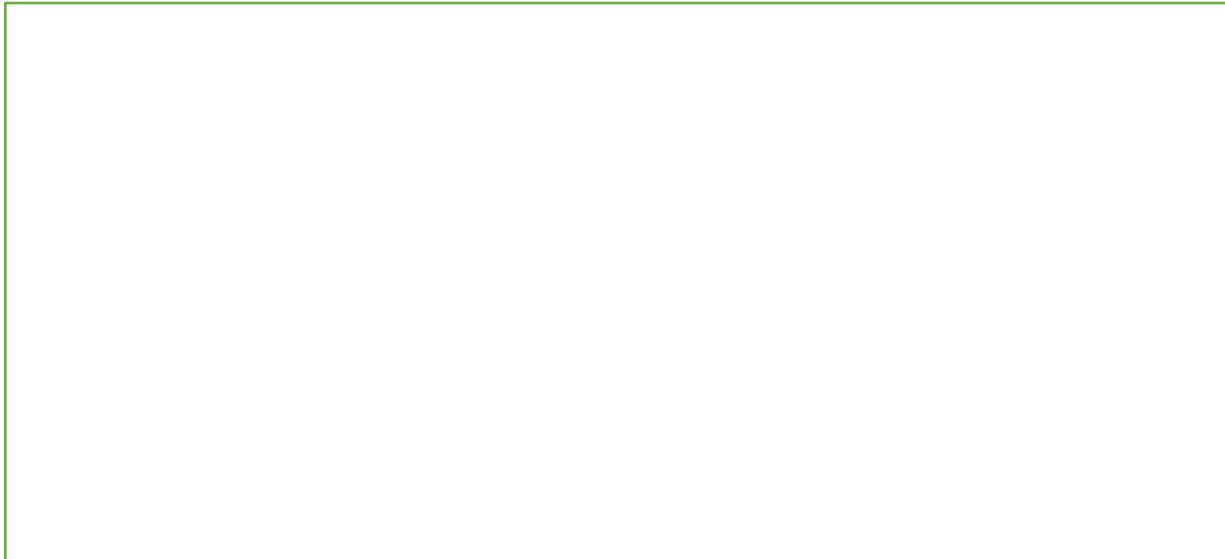
What is this request for:

New Space Allocation

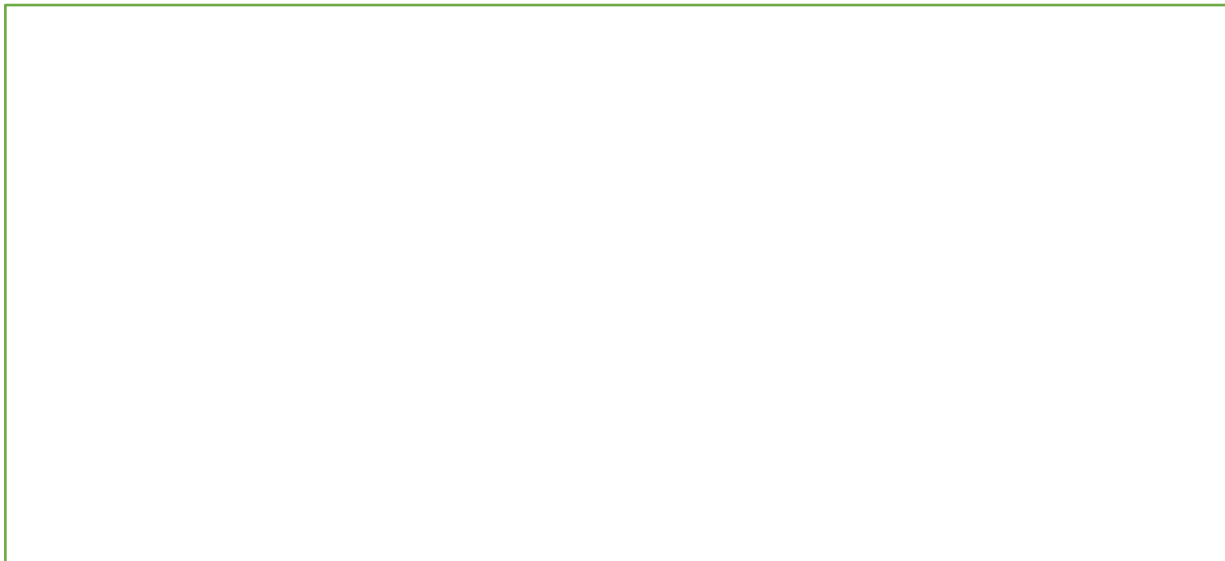
Relocation

Other (specify):

Reason for Request: Include rationale/explanation of need. Be as specific as possible.



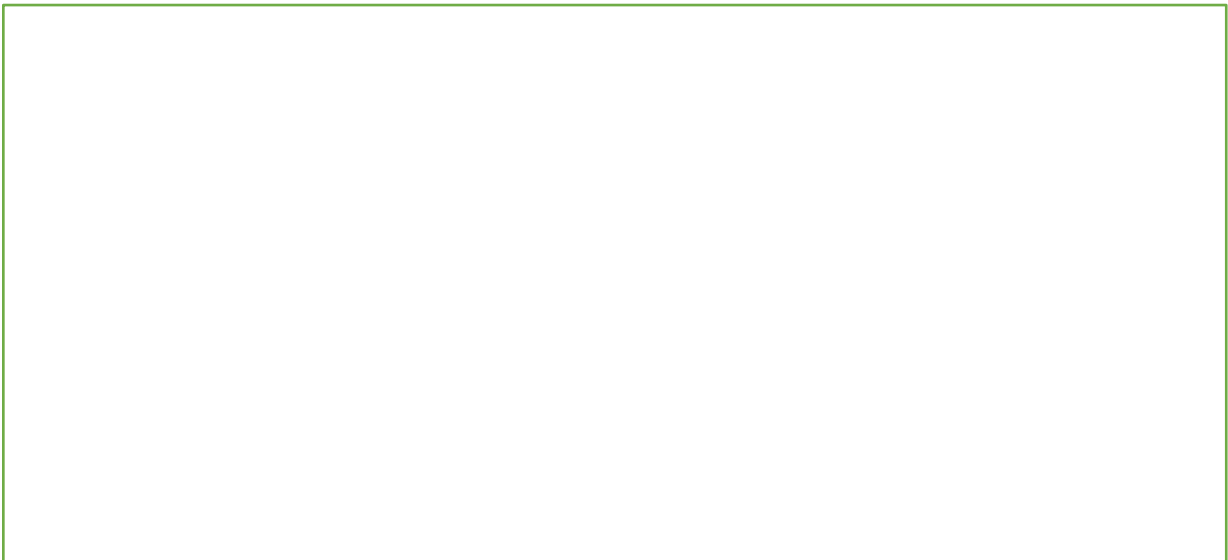
Outline any work that needs to be completed - room repairs, furniture needs, computer/phone requirements, etc.



What will the impact be if this request is denied?



What is the deadline or time frame for implementation of this request?



How Will Project Be Funded: (provide an index number, if available)

Department Funding _____ Grant Funding _____ Other Funding Source _____

Budget Available: \$ _____

Budget Availability Timeline (Grant Funds) _____

Approvals

All Signatures Are Required

Dean/Director Signature:

Date:

Vice President Signature:

Date:

Space Utilization Committee Chair Signature:

Date:

Other Signature:

Date:

Submit all requests to the Facilities and Events department.

Space Utilization Committee Use Only

Date Request Received:

Form #:

Decision

Approved

Denied

Comments: