

Facilities & Operations Project Request Instruction Sheet

Contact Information (this section should include the following):

- Requesting Department - Please select the name of department requesting the project. If your department is not listed, please contact Facilities & Operations at 762-3223.
- Department Contact Name - This should be the main contact that Facilities & Operations will work with to develop the project scope.
- Contact Phone - Phone number of contact person listed
- Contact Email - Email of contact person listed
- Contact Fax - This field is suggested, but not required.
- Authorizing Person - This should be the person authorizing the project and should be at the Dean/Director level or above. The authorizing person will be contacted.
- Authorizer's Email - Email of authorizing person

Building/Location

- This is the building or the grounds location of the project. If it will involve multiple locations please select General Campus and include the buildings in the Room(s)/Area(s) field.

Room(s)/Areas(s) Involved

- Please list specific room number(s) if available. If room numbers are not available please include a description of the area(s).

Department's Space

- Please indicate if the project will occur entirely in your existing department's assigned space.
- If not please identify space requirements and address the following:
 - How many additional offices/labs/etc. are you asking for?
 - What is the amount of square footage required?
 - Can some or all be accommodated within your existing space? Why? Or Why not?

Project Drivers

- What is driving this capital project need at this time? Please check any of the main categories that apply.
- Please select other for any additional drivers (e.g., changes in programming, pedagogy, or research; increased enrollments; faculty or student recruitment and retention; ability to compete with peer institutions).
 - Please elaborate on the drivers in the description field.

Project Categorization

- Please check any of the categorizations that apply.

Operational Impacts:

- Please check any operating impacts the project may cause.
 - Please describe specifically what impacts the project will have on the selected items.

Rational and Programmatic Justification:

- Please include as much description of the project as possible. This field should also address the following:
 - How are your existing facilities affecting:

- Your unit's ability to meet its core mission?
 - Faculty, student, or staff success?
 - Your unit's ability to compete with peer institutions?
- How has your unit worked around your facility challenges to date? (e.g., repurposing existing space to other uses, using another unit's space, leasing space, optimizing, sharing space with another unit or department and/or reconfiguring existing space)
 - What are the challenges of continuing the status quo?

Additional Information:

- Please use this field to upload any attachments such as sketches, drawings, etc.

Project Target Date(s):

- Desired Construction Start - This should be the date you would like to start the project and could vacate the space if necessary.
- Desired Completion Date - This is the date that you would like to have the renovation completed by. If possible given time constraints and workload, Facilities & Operation will target this date for completion.
- Required Completion Date - This is the latest date that your project could be completed by. If this date is not achievable it may affect Facilities & Operations ability to take the project on at this time.

Probable Funding Source:

- Please fill in the chartfields and indicate any funding amount has been set aside at this time. There will be an opportunity to change the funding source during the authorization approval. Note: All funding must be available to be transferred prior to design/construction contracts being signed.
- Commitment to Fund - Please select the organizational level that will be funding the project.