Request for Space Assignment

Department: _____________________________________________________________ Date: _______________

Department Representative: _________________________________________________ Phone: ______________

**SPACE ASSIGNMENT**

A. Total assignable square footage requested: ________________________________________________

B. Type of space and square footage of each:

- __Office: ________________________
- __Research Lab: ________________________
- __Instructional Lab: ________________________
- __Other (specify) ________________________

C. Preferred building or area:

1st: _________________________________________________________

2nd: _________________________________________________________

3rd: _________________________________________________________

D. Special considerations:

(i.e. wet or dry lab, electrical needs, proximity to existing space, etc.)

(If remodeling is necessary, submit a remodeling request to the Project Administration Center at Physical Plant (263-3333).

**JUSTIFICATION** (Explain the need for this space. Attach additional pages if necessary.)

**APPROVED:**

Department Chair

**APPROVED:**

Dean/ Director

Note: Analysis and recommendation will be forwarded to the Space and Remodeling Policies Committee for review and action.