

PROJECT/EQUIPMENT REQUEST FORM

REQUESTER INFORMATION

Today's Date:	Individual Requesting Work:	Contact Phone #:
	Requesting Department:	Email Address:

Please check the appropriate box to correspond with the request:

Building Repairs and Facility Alterations (academic and administrative buildings only)

Equipment (non IT) Purchase over \$1K

Furnishing, Classroom Upgrading, Information Technology Needs

Locations of work (building, floor, area, room #):

Detailed description of project, need, equipment (describe in DETAIL or add additional sheets when necessary):

Include any information regarding known facility modifications/requirements:

Estimate attached (not required):

Yes

No

Required completion date:

SUBMIT REQUESTS TO DEPARTMENT CHAIR OR DIRECTOR BY JANUARY 3, 2011

APPROVAL/RANKING

Department Chair/Director: (Name & Title)

Signature:

Ranking:

_____ of _____

(Please rank if submitting multiple requests)

To ensure consideration, requests must be submitted to the *Projects Committee* no later than Wednesday, January 5, 2011.