

General Assignment Classroom Project Proposal Form: Classroom Modernization & Minor Remodeling Projects

Department Name _____
Contact Name & Phone # _____
Campus Mail Address _____

Area to be Remodeled: Room _____ Building _____

Please check all areas that apply or describe in the space provided.

Remodeling Requirements:

Ceiling
 Electrical
 Floor Coverings
 Furniture
 Heating and Cooling
 Lighting (general and dimming)
 Walls
 Windows & Shades
 Other-describe: _____

Instructional Technology Requirements:

Audio system – Program and/or Microphone
 Automated control system for IT equipment
 Electric projection screen
 Manual projection screen
 Video/Data projection system (video projector, DVD/CD player, document camera, etc.)
 Other-describe: _____

Return completed form to your Department Chairperson

Department Chairperson and Deans Approval Required:

Department Chairperson: _____ Date: _____

Dean: _____ Date: _____ Priority Number: _____

DEANS RETURN THIS FORM TO THE SPACE MANAGEMENT OFFICE – 30 N. Mills St.

Note: All maintenance and repair items should be reported to the Space Management Office at 262-4414.
Additional forms can be found at: www.fpm.wisc.edu/smo/Forms.htm