

# Request for Space Assignment

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Department: \_\_\_\_\_ Date: \_\_\_\_\_

Department Representative: \_\_\_\_\_ Phone: \_\_\_\_\_

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## 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:

1<sup>st</sup>: \_\_\_\_\_

2<sup>nd</sup>: \_\_\_\_\_

3<sup>rd</sup>: \_\_\_\_\_

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).)

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

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**APPROVED:**

Department Chair

**APPROVED:**

Dean/Director

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

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