GUIDELINES:

Issued: December 2, 2013
Revised: January 27, 2016

PURPOSE:

To instruct departments on how to fill in and submit the Planning & Project Request Form.

DEFINITIONS:

Describe any acronyms or terms that are used in the policy or procedure.

PROCESS:

Requester Information:

Submission Date: *Enter the date that you are sending in the request, this field is auto-filled.*

First Name: *Enter the last name of the person who is sending in the request, this field is auto-filled.*

Last Name: *Enter the last name of the person who is sending in the request, this field is auto-filled.*

Department: *Enter the Department of the person who is sending in the request, this field is auto-filled.*

Phone: *Enter the phone number of the person who is sending in the request, this field is auto-filled.*

Fax: *Enter the fax number of the person who is sending in the request.*

E-Mail: *Enter the e-mail address of the person who is sending in the request, this field is auto-filled.*

Title: *Enter the title of the person who is sending in the request, this field is auto-filled.*

Manager: *Enter the Manager's name of the person who is sending in the request, this field is auto-filled.*

Office: *Enter the office location of the person who is sending in the request, this field is auto-filled.*

Existing Location Information

Where is the proposed location of the space request / project going to be? *Enter the building and floor of the space involved in the request.*

Program: *Enter the name of the program (if applicable).*

Chair: *Enter the name of the chairperson.*

Individual in the department who will be a contact

Check here if the contact person is the same as the requester above: *Check the box and the fields will be auto-filled.*

Contact Name: *Enter the name of the person who will be the contact.*

Contact Phone: *Enter the phone number of the person who will be the contact.*

What are you requesting?

Building Envelope Improvements: *Check if you are requesting an improvement to the outer structure of a building.*

Common Space Improvements: *Check if you are requesting an improvement to common areas of a building shared by tenants (i.e. restrooms, elevator lobby, etc.).*

Conceptual Estimate: *Check if you are requesting a conceptual estimate; conceptual estimating describes the practice of figuring an approximate cost or time-schedule estimate for a particular project before all details are known.*

Conceptual Planning (pre-project): *Check if you are requesting conceptual planning; a conceptual plan is a scaled drawing to help provide a concept of what will fit.*

Efficiency Study: *Check if you are requesting an efficiency study.*

Layout and Fit Test: *Check if you are requesting a layout and fit test.*

Mechanical, Electrical or Plumbing Improvements: *Check if you are requesting mechanical, electrical or plumbing improvements.*

Move / Relocation: *Check if you are requesting a move or relocation.*

Needs Assessment: *Check if you are requesting a needs assessment; a needs assessment is a systematic process for determining and addressing needs, or "gaps" between current conditions and desired conditions or "wants".*

Space Request (additional space for storage, labs, offices, etc.): *Check if you are requesting physical space.*

Post Occupancy Review: *Check if you are requesting a post occupancy review; a post occupancy review involves an evaluation about buildings in use from the perspective of the people who use them; it assesses how well buildings match users' needs, and identifies ways to improve building design, performance and fitness for purpose.*

Process management for planning requests and studies: *Check if you are requesting process management for planning requests and studies.*

Programming: *Check if you are requesting programming.*

Return of Space: *Check if you are requesting return of space.*

Space Renovation: *Check if you are requesting a space renovation.*

Will this space request / project directly or indirectly affect or be located by / near an animal facility? *Select yes or no.*

Will you be requesting animal housing space > 24 hours in your Animal Studies Committee (ASC) protocol submission? *Select yes or no.*

DCM Requirements
Will you be requesting animal procedure space in your Animal Studies Committee (ASC) protocol submission? *Select yes or no.*

What species? *Enter the animal species that will be involved with the request.*

When will the animals be arriving? *Enter the date when the animals will be arriving to the space.*

Protocol approval by Animal Studies Committee is required prior to initiation of construction.

Any biohazard requirements? *Enter any biohazard requirements for the space.*

Are there any special procedures or core needs? *Enter any special procedures or core needs for the space.*

Is there a preferred location? *Enter a building / floor where you prefer this space to be located.*

Please provide a description of need: *Enter a description of the need you are requesting.*

What space is to be renovated?
Renovation Building(s): *Enter the building name in which the renovation will be taking place.*

Renovation Room(s): *Fill in the room numbers to be renovated.*

What space are you wanting to return?
Return Building(s): *Enter the building name involved in the space return.*

Renovation Room(s): *Enter the room numbers involved in the space return.*

Please indicate what is driving this need
New Program: *Check if a new program is driving this need.*
Research Grant: *Check if a research grant is driving this need.*

Inadequate Space: *Check if inadequate space is driving this need.*

New Hire: *Check if a new hire is driving this need.*

New Equipment: *Check if new equipment is driving this need.*

Other & Other Description: *Check and provide description if something else other than listed above is driving this need.*

Who is this work to be performed for? *Enter the department, division, person who this work is to be performed for.*

Anticipated occupancy / start date: *Enter the date that the space is needed.*

If temporary need, please provide an end date: *If this is a short term need, enter the date that the space is no longer needed.*

Have you been in contact with the Dean's office, FMD, or DCM regarding this request? *Check yes or no on whether you have had discussions about this request with anyone in the Dean's office, FMD or DCM.*

If yes, who have you been in contact with and when? *If you have had discussions about this request with anyone in the Dean's office, FMD or DCM, please indicate who you have spoken to and when you had the conversations.*

Has any work been done on this request as a result of that contact to date? If yes, provide detail and current status of that work. *If anyone has done any work on this request, please provide the information and status of the work.*

Explain what work was done: *If work has been done on this request as a result of contact with the Dean's Office, FMD or DCM, please explain what has been done.*

If assistance is needed in filing out this request or understanding space type, please contact Cheryl Kilwin, Space Information, at 362-8317.

Check the box if your business manager has approved of this request (this form cannot be submitted if this box is not checked).

Check the box to "sign" this request (this form cannot be submitted if this box is not checked).