

SRI REQUEST FORM

Return completed and signed form to a Space Management Committee member:

**Student Services: Wendy Endress, College Advancement: Sharon Harrison, President's staff: Steve Trotter
Academics: Ken Tabbutt, Finance and Administration: Paul Smith, Housing: Sharon Goodman**

I. PROJECT IDENTIFICATION:

Requestor and contact information: _____

Division/Department: _____

Building and Room Number(s) to be renovated: _____

Today's Date: _____

Detailed description of the project: (Please continue on back of this form.)

II. SCHEDULE:

Ideal start & completion dates: _____

Possible alternative dates: _____

III. COST:

Has this been formally cost estimated by Facilities Staff? Yes No

Who provided the estimate and when? _____

Estimated Cost as per Facilities staff: _____

Estimated Cost as per other: _____

Indicate Funding Source: SRI and Other _____% (List dollars or percentage. List other funding sources on back of the form.)

IV. COORDINATION (as appropriate):

Academic Dean: _____ / Date: _____

Building/Area Manager: _____ / Date: _____

Facilities Services: _____ / Date: _____

V. REQUEST APPROVAL:

Authorizing Budgetary/Unit Head Signature / Date

Division Vice President Signature / Date