

# **PROJECT REQUEST AND APPROVAL FORM**

*Form must be filled out electronically.*

*A signed hard copy should be sent to Facilities Engineering*

## **INITIAL REQUEST**

*(Completed by requestor)*

Date: \_\_\_\_\_ Building \_\_\_\_\_  
Project Name: \_\_\_\_\_ Floor : \_\_\_\_\_  
Room No. \_\_\_\_\_

**Describe the project scope in detail:**

**Describe how this project or initiative falls within the strategic plan of the University.  
Reference specific sections of the plan:**

**Describe in detail how this project or initiative will benefit the University community.**

**Will the completion of this project impact the campus operating budget or individual department budgets? If so, how?**

**Will the completion of this project impact overall revenues to the University?**

**Describe the funding sources for the project and to what level the funds have been secured.**

Requestor name: \_\_\_\_\_  
Funding source and budget number: \_\_\_\_\_  
Budget amount \$ \_\_\_\_\_  
Desired start date: \_\_\_\_\_  
Desired completion date: \_\_\_\_\_

Vice President Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*V.P supports the initiatives outlined in this request and confirms available funds for its completion.*

**FACILITIES ESTIMATE**

*(Completed by the Director of Facilities Engineering)*

Date:

Estimated cost: \$

Conceptual plans (Y/N)            indicate if plans are attached (Y/N)

Architectural design required (Y/N)

Permit required (Y/N)

Time frame for design:            days

Time frame for construction:        days

*Note: design and construction durations begin after final project approval*

Work performed in house or outside contractor

Comments:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FINAL SIGN OFF**  
(Completed by requestor)

Project cost \$

Funding Source

Note: funding source must be approved by the Budget Director

Contractor/SHU Project Manager

Time line

Design            days

Permits            days

Projected start date

Projected completion date

**Signatures: (routing shall follow in the order listed)**

VP of requesting department \_\_\_\_\_

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

Budget Director \_\_\_\_\_

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

VP Finance & CFO \_\_\_\_\_

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

(forward to Facilities Engineering upon signing)