

**KEY INFORMATION** 

## PROJECT REQUEST FORM

Please fill out the form below with as much detail as possible so we can develop an accurate scope of work. Leadership approval is required before submitting a project request.

Once signed, email completed form to <a href="mailto:fmpdc@ucdenver.edu">fmpdc@ucdenver.edu</a>. The Design & Construction (D&C) team will contact the requestor to set up an initial meeting to discuss the project. For more information, visit the <a href="mailto:project Requests website">Project Requests website</a>.

## Request Date: MM/DD/YY Requestor Info: First Name Last Name Email Phone Department / Unit Name: Who will be the primary Point of Contact through project completion? First Name Last Name Email Phone Who will make final decisions on scope and budget? First Name Last Name Email Phone Leadership Approver: Dean: For Schools & Colleges Asst. / Assoc. Vice Chancellor:

For Administration, Finance, Academic, & Student Affairs Units

## PROJECT OVERVIEW



Briefly describe your project request.

What	type of project will this be?	Renovation	New Construction
Where	e will this project be located?		
	Building(s): Check all that apply.		
	Business School (BUS)	Learning Commons (RH1)	
	City Heights (RH1)	Lynx Crossing (RH2)	
	CU Denver Building (CUD)	Student Commons (AB1)	
	Lawrence Street Center (LSC)	Wellness Center (WC)	
	Floor(s):		
	Room #(s):		
ls any	portion of the project area occupied?	YES	NO
If yes, what is the plan for the current occupants?			

Is the space in the project area currently assigned to your department?

## PROJECT DESCRIPTION



Describe the issue(s) needing resolution and identify the key factors driving this project.

What specific requirements need to be met such as code regulations, or design features?

What is your source of funding? How much are you authorized to spend on the project?



What is the urgency of this project? Are there any critical deadlines we need to consider?				
How will this project benefit your department and/or the university?				
What additional information do we need to know to help us understand your goals for this project?				
SIGNATURES				
All parties hereby agree with the content of this document, and also agree and understand that this electronic				
signature is equivalent to manual/handwritten signatures on the form.				
Requester:				
		Date		
Dean:				
	For Schools & Colleges	Date		
Asst. / Assoc. Vice Chancellor:				
	For Administration, Finance, Academic, & Student Affairs Units	Date		