

# FACILITIES PLANNING & OPERATIONS SPACE AND CAPITAL PROJECT REQUEST FORM

The Rowan Space Planning Committee oversees the assignment and utilization of space owned or leased for use by the University. The purpose of this Space Request Form is to provide information necessary to the Space Planning Committee for evaluation of space requests. The purpose of the Space Planning Committee is to:

- Promote the efficient use of space;
- Foster a coordinated approach to addressing space needs on all campuses;
- Improve customer service for those making requests;
- Ensure transparency and accountability in the space allocation process;
- Ensure that all requests for space, requests for change in occupancy, and requests for change in room use are authorized by the responsible parties;
- Ensure that the University's facilities information (building floor plans and space inventory) is current, for internal space management purposes and for accurate reporting;
- Plan for future growth across the campuses.

While it is recognized that the assignment and utilization of space (ie. office, classroom, storage, performance, etc.) falls within the responsibility of the administration of the University, it is also recognized that the key stakeholders at the University should also be consulted and have input into the ultimate decision on space utilization. No department, unit or division "owns" space. However, space is a University resource and the assignment and utilization of space, as determined by the administration, is based on programmatic need and on what is in the best interests of the University, particularly as it pertains to the academic mission.

### **INSTRUCTIONS:**

- The Applicant needs to fill out the following pages of this form in its entirety. Please attach any additional information as necessary.
- This form should be filled out electronically, if possible, and printed with the applicant's signature. Attach any relevant supporting material. Fill in date of application.
- Prior to submitting any request for space, the request must be approved and signed by the Dean or Vice President of the Department, and approved and signed by the Provost to ensure that they are in agreement with moving forward and that funding for the work is in place.
- Your application will not be processed unless an inventory, including purpose and / or occupancy of all the space currently being used by your department is complete and updated, and provided to the Department of Planning and Real Estate.
- Any rooms that will be vacated to accommodate this request will become a part of the inventory of available space and secured by Division of Facilities and Operations until it is reoccupied.
- If you have any questions, require assistance or need clarification, please contact the Department of Planning and Real Estate at spaceplanning@rowan.edu or 856-256-4949.
- Submit completed forms to <u>spaceplanning@rowan.edu</u>. In the subject line of the email, say "SPACE AND CAPITAL PROJECT REQUEST FORM".



PART 1 - CONTACT INFORMATION				
Name of Applicant:	] Title of Applicant:		]	
Department:			]	
Email:	Phone:		]	
Best day and time to reach the applicant:				
Signature of Applicant:		Date:	]	
For Internal Use Only:	Application No.			
Received by:	Date:			
Reviewed by:	Date:			
Director Review:	Date:			
University Facilities Design and Construction notified of Project	Yes: No:			
University Mover Supervisor notified of Project	Yes: No:			
University Locksmith notified of Project	Yes: No:			
University Facilities Operations Dept. notified of Project	Yes: No:			
University IRT notified of Project	Yes: No:			
University EHS notified of Project	Yes: No:			
University Public Safety notified of Project	Yes: No:			
University Scheduling and Events notified of Project	Yes: No:			
Date of Space Planning Committee Meeting:				
Status of Review:				
Date letter sent to Applicant regarding status of review:				
Letter sent by:				
Letter copied to University Facilities Design and Construction	Yes: No:			
Letter copied to University Mover Supervisor	Yes: No:			
Letter copied to University Locksmith	Yes: No:			
Letter copied to University Facilities Operations Dept.	Yes: No:			
Letter copied to University IRT	Yes: No:			
Letter copied to University EHS	Yes: No:			
Letter copied to University Public Safety	Yes: No:			
Letter copied to University Scheduling and Events	Yes: No:			

Notes from Committee Meeting:



## PART 2 - Request for Space

### Existing Space and Occupancy

Location of existing space(s), including the campus, the building, floor, and room:

Occupant(s), the(ir) title(s), and / or use of the existing space:

#### **Proposed Space**

Location of proposed space(s), (campus, building, floor, room):

Occupant(s), the(ir) title(s), and / or use of the proposed space:

Full time or part time faculty / staff?

Temporary or permanent faculty / staff?

Department Head of proposed space (VP, Dean):

Type of space requested (office, class, lab, storage, etc.):

Describe needs for the proposed space(s) (furniture, equipment, lighting, IT, security, etc.):

Reason space is needed:

Anticipated date space needed:

Will the current occupant(s) be displaced? If so, where will the occupant(s) be relocated to?

Funding source:

Budget for the work:

Authorized By:

(Printed Name of Dean or Vice President of Department: new occupancy)

 (Signature)
 (Date)

 Authorized By:
 (Printed Name of Dean or Vice President of Department: vacating occupancy)

 (Signature)
 (Date)

 Authorized By:
 (Date)

(Provost Signature or Sr. Vice President Signature)

(Date)



## **PART 3 - Additional Information**

Please provide any additional notes and information that would assist in the application and review of your request:

Briefly describe why the space is needed or why you need to change your space.

How often will the space(s) be used? Hours of operation?

Address the implications to your program / service if your request space is not approved.

What attempts have been made to locate space within your current space allocation?

Do you anticipate the number of people in your unit increasing with the next two years? If yes, please indicate reasons for anticipated growth and whether or not funding has been identified for those positions.

Is this application a result of your department hiring additional staff? If so, has the University Provost or CFO approved funding for the new hires?

Do you anticipate staff within your department will be leaving or retiring in the next two years?

Does your space request require specific equipment or furnishings? If yes, please complete Part 4 of this application.



# PART 4 - Facilities Equipment Additional Information

Room Number proposed for equipment location:	[]
Equipment Name:	[]
Equipment Manufacturer:	[]
Equipment Model No.:	[]

Electrical Requirements: Voltage\_\_\_\_\_ Amps\_\_\_\_ Watts\_\_\_\_ Phase\_\_\_\_\_

Does this Equipment require:	Yes	No	Notes:
Controlled temperature of degrees F			
Controlled humidity of%			
Special ventilation			
Dry filtered air			
Compressed air			
Cooling water			
Hot or cold domestic water			
Vacuum connection			
Steam connection			
Gas connection			
Sewage connection			
Drains			
Special lighting			
Disassembly / reassembly			
Building services or modifications			
Weighs more than 80 pounds per square foot			
Requires housekeeping pad			
Requires vibration isolation			
Will equipment fit through existing doors?			
Will equipment fit into existing room as is?			

All equipment installed must be UL listed.

# Please attach Manufacturer's specifications to this checklist.



### **REVIEW PROCESS**

- For all requests, the Department of Planning and Real Estate will log the request and guide it through the review process. This may involve:
  - Planning personnel may walk the existing space and the proposed space for a better understanding of the request. The spaces are documented for area, finishes, utilities, adjacencies, etc. in order to identify if it meets the requested space requirements. In the event that additional space is needed, the Department of Planning and Real Estate will evaluate the vacant space that meets the needs.
  - In certain situations, a space analysis is required. A space analysis requires the creation of general layouts in AutoCad, to ensure the space is meeting the needs of the request made. In some cases we also provide a space analysis and layouts for existing space, showing how the space use can become more efficient.
  - Planning personnel may assist the applicant with generating a preliminary cost estimate for the proposed project.
     Planning may contact the applicant during the review process to discuss whether the applicant's department has a budget and whether the department has a funding source for the project.
- Presentation / Approvals / Notifications
  - All information from the Space Request Form and all findings from the research gathered is compiled and entered into a spreadsheet that is reviewed by the Space Planning Committee.
  - After the Space Planning Committee reviews the request and recommendation, an approval or denial letter is sent to the requester with a copy to Facilities Design & Construction.
  - A copy of the approved letter will be sent to the University Design and Construction Department, the Facilities Operations Department, the Locksmith, IRT, and / or Moving Supervisor depending on the scope of work, to notify that staff of the new project.
  - The Applicant will need to contact these Departments to arrange for the work to be completed.
- All projects that have been approved will be permitted for one calendar year from the date of the Approval Letter being issued to the applicant.