

# Departmental Capital Construction and Remodeling Project Request



Requesting Department

Department Contact Name(s) & Contact Phone Number(s)

Building

Room Number / Space Description

Description of Proposal/Scope of Work

Why is this Capital Proposal a Priority for the Requesting Department?

What Group Will Most Benefit from this Project?    Students    Faculty    Staff    External Customers

Why will this Group Benefit from this Project?

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Dean/Director Signature

Date

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This section to be completed by the Appropriate Cabinet Member

Division \_\_\_\_\_ Priority # \_\_\_\_\_

\_\_\_\_\_  
Appropriate Cabinet Member Signature Date

This section to be completed by Business & Finance

Initial Cost Estimate \$ \_\_\_\_\_ Date \_\_\_\_\_

Final Cost Estimate \$ \_\_\_\_\_ Date \_\_\_\_\_

University Priority # \_\_\_\_\_