

SMCCCD Facility Project Request Form

Is this an emergency (imminent threat to persons, property or equipment? Please contact Facilities immediately

Step 1: Requestor fills out the form below, signs and submits to Dean/Administrator.

Request Date:	
College:	
Requestor Name & Title:	
Building Name / Number:	
Division or Work Area Name:	
Specific Room Number(s) (If Applicable):	
Please provide a description of all the work requested:	
	Requestor (Signature) :

Step 2: Has this need been articulated via Program Review, Student Learning Outcomes, or other institutional planning documents? If so, please attach a copy of the relevant section of the document. Sign and forward to Facilities Manager.

	Dean / Administrator (Signature) :
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Step 3: Provide Cost Estimate, sign and forward to Vice-President of Administration.

Estimated Project Cost:	Facilities Manager (Signature) :
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Step 4: VPA provide Funding Code, sign and forward to the VC of Facilities Planning, Maintenance & Operations.

Funding Code (FOAPA):	Vice-President of Administration(Signature):
	VC Facilities Planning, Maintenance & Operations (Signature) :