

## CAMPUS FACILITIES PROJECT REQUEST FORM

This is a fillable pdf. Save the file to to your desktop, and please fill out completely, print out for required signatures, and return the signed form via email to: Tom.Gaimaro@baruch.cuny.edu  
Please enter "Project Request" in the subject line.

1. All required signatures are to be obtained from the requesting department before submitting the Project Request.
2. All requests are subject to review and approval by Campus Facilities.
3. Previously selected projects that have received departmental approval will be given priority.
4. New Project Requests will be reviewed based on the Fiscal Priority List.
5. When the Project Request is approved by Campus Facilities you will be contacted to schedule a meeting and walk through of the space.

**Name of Project:****Type of Project:**     Renovation     Move     Dedication     Furniture     Other**School/Department:****Requestor/Contact:****Email:****Date Submitted:****Project Description (attach additional page if needed):****Reason for Project (attach additional page if needed):****Funding Source(s):****Project Budget \$****Approvals**\_\_\_\_\_  
Chair/Department Head (Print Name)\_\_\_\_\_  
Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Dean/VP (Print Name)\_\_\_\_\_  
Signature\_\_\_\_\_  
Date

(DO NOT WRITE IN SHADED AREA)

**FACILITIES APPROVALS:**\_\_\_\_\_  
AVP (Print Name)\_\_\_\_\_  
Signature\_\_\_\_\_  
Date\_\_\_\_\_  
VP (Print Name)\_\_\_\_\_  
Signature\_\_\_\_\_  
Date