

SPACE REQUEST FORM

Directions for Completing Form: Respond to the requested information with supporting details. Some parts/ questions apply to specific situations, and some require more extended responses than others.

Submission of the **Space Request Form** must be approved by a Manager, Dean, Director, Associate Vice-President, or Senior Executive Team Member.

Send the completed form and the attachments, or any questions to: space.planning@nbcc.ca.

PART I: PRIMARY CONTACT INFORMATION

Name:	Phone:
School Department/Division:	Email:

PART II: PURPOSE OF REQUEST

1- Briefly describe the reason for the request.	
2- Why/how is the current space inadequate for the identified need?	
3- What benefits (Strategic, Programmatic, Financial, etc.) will result from having the request approved?	
4- What will be the negative impact if not approved?	

Part III: SPACE REQUEST ALTERNATIVES

QUESTION	Yes	No	COMMENT/ ADDITIONAL DETAILS
1- Have you examined all avenues to solve this space requirement within the existing space?			
<p>If yes, please list specific solutions explored and the reason(s) for insufficiency. (For example, has the campus considered maximizing under-utilized space to solve this need? Has the campus re-evaluated the space assigned to lower-priority initiatives? What possibilities for shared space have been explored?)</p>			

PART VI: SPACE REQUEST DETAILS			
QUESTION	Y	N	COMMENT/ ADDITIONAL DETAILS
1- Is there a requested effective date? If yes, please specify.			
2- Is this request for additional Space to support a new initiative or expansion of a current one?			
If yes, please describe the type(s) of space requested and its intended use.			
3- Is this request for repurposing existing space?			
If yes: a) Please describe the current and proposed usages for each affected space.			
b) What is the expected maximum number of occupants in the proposed space?			
4- Will a currently occupied space be vacated if this request is approved? If yes, please specify the location.			

If the Change Request requires Renovation/Construction, please answer this section:

Part V: CHANGE REQUEST FUNDING (Please attach supporting documentation to this form.)			
QUESTION	Yes	No	COMMENT/ ADDITIONAL DETAILS
1- Indicate where the budget will come from for renovation/construction. (Budget Manager)			
2- Is there a request for a One-Time Project Fund?			
If yes: How much is the One-time cost?			
3- What is the ongoing impact on the operating costs?			
4- Does the budget exist? Or has it been approved to fund the operating costs?			
5- Is the requested space to be used for a grant, or award-funded program, and/or costs to be paid by the grant/ award?			
If yes, please specify the Agency, Type, Amount, and Duration of the Grant/ Award.			
If a donor funds (all or in part) the space request, please describe the circumstances.			

Part VI: SPACE REQUIREMENTS ASSESSMENT			
QUESTION	Yes	No	COMMENT/ ADDITIONAL DETAILS
1- Is the requested space needed on a temporary basis?			
If yes: When will the space be vacated? Please identify any other timing needs.			
2- Are there any Information Technology requirements? If yes, please specify.			

Part VII: Approval of Request Submission (Manager, Dean, Director, Associate Vice-President, or SET member)	
The signature asserts that the request is approved to be forwarded to SPC.	
Printed Name: _____	
Signature: _____	Date: (dd/mm/yyyy): _____

Part VIII: Space Planning and Allocation Committee Use Only	
Date Received (dd/mm/yyyy)	
Date Reviewed (dd/mm/yyyy)	
<i>Approved</i>	<i>Not Approved</i>
Comments:	