

## **University Space Request**

| OFFICE USE ONLY |  |  |  |  |
|-----------------|--|--|--|--|
| SR-1 No.:       |  |  |  |  |

Use this form to request additional assigned space or to re-designate currently assigned space. For construction within space already assigned to your program, see the CR-1 form. Requests for new space or movement of personnel must be forwarded to <a href="mailto:Facilities@tamusa.edu">Facilities@tamusa.edu</a> for review by the Space Management Committee prior to submitting a key or ITS move requests. Key or ITS move requests unaccompanied by this approved form will be denied.

| Requ   | esting Program:  |                 |                          | Date:                               |
|--------|--|-----------------|--------------------------|-------------------------------------|
| Requ   | esting Person:   | Phone:          |                          |                                     |
| Requ   | esting Person's Email:   |                 |                          |                                     |
| Lates  | st date space related action is  |                 |                          |                                     |
| Tvne   | of Request:  |                 |                          |                                     |
|        | Request additional assigne   | ed space        |                          |                                     |
|        | Request to re-designate currently assigned space (i.e. change room use |                 |                          | use from conference room to office) |
|        | Other  |                 |                          |                                     |
| Гуре   | of Space Needed:   | Spac            | e Will Be Used By:       |                                     |
|        | Classroom  |                 | Faculty                  |                                     |
|        | Conference Room  |                 | Staff                    |                                     |
|        | Laboratory   |                 | Research                 |                                     |
|        | Storage  |                 | Student                  |                                     |
|        | Office   |                 | Other                    |                                     |
|        | Study  |                 |                          |                                     |
|        | Other  |                 |                          |                                     |
|        | ns, or programming may be a  |                 |                          |                                     |
| Provi  | ide desired adjacencies to oth   | er units/progr  | ams if necessary.        |                                     |
|        |  |                 |                          |                                     |
|        |  |                 |                          |                                     |
|        |  |                 |                          |                                     |
|        |  |                 |                          |                                     |
| lf a p | particular space is requested,   | please identify | building and room number | $\mathbf{r}(\mathbf{s})$ .          |
|        |  |                 |                          |                                     |
|        |  |                 |                          |                                     |
|        |  |                 |                          |                                     |
|        |  |                 |                          |                                     |

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| What, if any, space will be vacated if a new allocation is made?   |   |               |  |  |  |
|--|---|---------------|--|--|--|
|  |   |               |  |  |  |
|  |   |               |  |  |  |
|  |   |               |  |  |  |
| What are the negative consequences if this request is not granted? |   |               |  |  |  |
|  |   |               |  |  |  |
|  |   |               |  |  |  |
|  |   |               |  |  |  |
| Will 1   | there need to be any remodeling or enhancements to accommodate the p    | proposed use? |  |  |  |
|  | No, the program will use existing space in its "as is" condition.       |               |  |  |  |
|  | Yes, and I have attached the CR-1 (University Construction Request) For | rm.           |  |  |  |
| Is an  | y new furniture and/or equipment needed?                                |               |  |  |  |
|  | No, the program will move existing furniture and equipment.             |               |  |  |  |
|  | Yes, and I have attached the FR-1 (University Furniture Request) Form.  |               |  |  |  |
| As <u>D</u>  |   | Date:         |  |  |  |
|  | _   | Date:         |  |  |  |
| As <u>Pı</u>   | rovost/Vice President, I approve request                                | Date:         |  |  |  |
| Space  | e Management Committee Recommendation:                                  |               |  |  |  |
|  |   |               |  |  |  |
|  |   |               |  |  |  |
|  |   |               |  |  |  |
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|  |   |               |  |  |  |
|  |   |               |  |  |  |
|  |   |               |  |  |  |
| A c Dı   | resident, I give my final approval                                      | Date:         |  |  |  |

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