Request for Space Change or Additional Space

Ball State University
Facilities Planning & Management

Complete form providing as much detail as available.
After signatures obtained, forward to Facilities Planning & Management.

Date Rcv'd.

Name _____ Phone # _____

Department _____ E-mail Address _____

☐ **Requesting Change in Use of Existing Space**

Building/Room Number(s) _____

Current Use _____ Proposed Use _____

☐ **Requesting New or Additional Space**

Type/Quantity of Space Needed _____

_____

Needed By (Month/Year) _____ Need Until (If Temporary) _____

☐ Existing space will be vacated if request is approved (Room Numbers) _____

Detailed Description and Justification If requesting new space, also note specific locations you want considered, proximity needs for the new space, and any ways you've tried to solve the space need with your existing space. Attach additional pages if needed.

Reviews

Unit Head (Print or type)	Signature of Unit Head	Date
Dean/Administrative Head (Print or type)	Signature of Dean/Administrative Head	Date

Recommendation

☐ Recommended

☐ Not Recommended

Chair of Space Planning Committee — Date

COMMENTS: