

**THE UNIVERSITY OF TEXAS AT BROWNSVILLE AND TEXAS SOUTHWEST COLLEGE
SPACE REQUEST FORM
PROPOSAL TO INITIATE ACQUISITION OF UNIVERSITY SPACE**

1. SCHOOL OR COLLEGE NAME / DEPARTMENT NAME:		2. DIVISION:	
3. PERSON SUBMITTING REQUISITION:			
Name:	Job Title:	Email:	Phone#:
4. SPACE NEEDED: (Mark all that apply) <input type="checkbox"/> Office(s) <input type="checkbox"/> Lab(s) <input type="checkbox"/> Classroom(s) <input type="checkbox"/> Storage(s) <input type="checkbox"/> Study Room(s) <input type="checkbox"/> Other (Please specify): _____			
5. SPACE LOCATION DESIRE (If no space has been identified, leave blank):			
First Choice		Second Choice	
Building Name:		Building Name:	
Room Number:		Room Number:	
Capacity:		Capacity:	
Square Feet:		Square Feet:	
Current Assignment:		Current Assignment:	
SUAC Recommendation: Approved <input type="checkbox"/> Denied <input type="checkbox"/>		SUAC Recommendation: Approved <input type="checkbox"/> Denied <input type="checkbox"/>	
6. CURRENT USE OF SPACE. ARE YOU DISPLACING ANYONE? WHO IS IT? WHERE ARE THEY GOING? (Attach any extra documentation):			
7. ENVIRONMENTAL HEALTH AND SAFETY REVIEW & SIGN OFF:		8. ADA COMPLIANCE REVIEW & SIGN OFF:	
9. ANTICIPATED RENOVATIONS NEEDED (Attach any extra documents & sketch if applicable):			
10. SOURCE OF FUNDS AND BUDGET:			

APPROVALS

1. _____ Date
 Person Submitting Requisition

2. _____ Date
 Division Vice President

3. _____ Date
 SUAC Chair Person

OFFICE USE ONLY
Upon completion of approvals forward copy to:
<ul style="list-style-type: none"> • Provost • Requesting Department • Campus Police • Physical Plant • Facilities Coordinator • VPs

Number of Attachments: _____