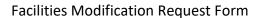


# Facilities Modification Request Form

Project Name:	Date:	
Requestor Name(s):		
Requestor Department(s):		
Provide building name(s) and room number(s):		
<b>List stakeholders on last page:</b> (Stakeholders are individuals, departments or others who would be impacted by this request, and those who should have knowledge of the requested modification.  Stakeholders include anyone who works or has reports/programs located in the building of the request.)		
Do all stakeholders support this request? If not, why?		
Indicate what the space will be used for - Instruction, Office, Storage, Other	er (please describe):	
Describe the request in detail:		





Why is this request needed (please provide justification, benefits to students, department, college or community)?

How does this project support or align with one of COCC's Strategic Plan Goals?

What are the implications if the request is not approved?

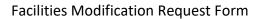
If this request is asking to change space utilization (e.g., convert classrooms to offices) is there a plan to mitigate the lost space?



-Fill on following page

Are there any personnel implications – will the modification require hiring new department or program employees?

Does the request require new furnishings or technology? Describe furnishings.
What is the desired timeline for the request to be completed?
Please provide estimated cost impacts. Describe pricing quotes and options:
List Funding Source(s) (grants, General Fund, and/or Non-General Fund):
Sustainability Impacts - Can an aspect of this project have a Sustainability aspect?  -Could it align with COCC's Sustainability goals?  -Could it include Greenhouse Gas Emissions reducing components?  -Can it help to conserve natural habitat or improve carbon sequestration  -Can it include plans to reuse or recycle?  -Could it find ways to conserve water?





#### **Sustainability Impact:**

## Safety:

- -Does this project have a Safety component?
- -Could it improve an existing Safety process or implement a new process not being used?



## **Facilities Modification Request Form**

Please provide a rough sketch of your request (contact Campus Services if you need a floor plan):



#### Facilities Modification Request Form

**Required Signatures:** Please have requesters and all listed stakeholders sign and date to ensure they were part of this process. (see notes below)

PRINT NAME:	SIGNATURE:	DATE:

#### \*Notes:

<sup>-</sup>SLT Member and First Line Supervisor signatures are required.

<sup>-</sup>Stakeholder signature does not signify that they approve the project, only that they approve it to be considered by Facilities Advisory Committee.