



**PROJECT**

**PROJECT CONTACT AND APPROVAL**

Current Date \_\_\_\_\_ Desired State Date \_\_\_\_\_ Desired Completion Date \_\_\_\_\_  
(MM/YYYY) (MM/YYYY)

Department \_\_\_\_\_

Initiator \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_

Project Contact \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_  
*Project Contact: In direct connect with project manager oversees the daily oversight.*

Project Sponsor \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_  
*Project Sponsor: Identifies, defines, acquires funding for and makes a business case for project. Approves all scope changes.*

Dean/AVP/Vice President Signature \_\_\_\_\_

SVP/Provost/President Signature \_\_\_\_\_

**PROJECT DETAILS**

**DETAILED ESTIMATE** (budget available this FY)     **FUTURE PLANNING ROM REQUEST FORM**

Building Name (if applicable) \_\_\_\_\_ ROM # (if applicable) \_\_\_\_\_ Space Code/Location (if applicable) \_\_\_\_\_

**WORK DESCRIPTION** (Include as much detail as possible. Provide specs, quotes, etc.)

**AUTHORIZATION UPON APPROVAL**

**DATE APPROVED** \_\_\_\_\_

	Estimate	Change Order #1	Change Order #2	Change Order #3	Total Cost
Total Project Cost					

Amount	Fund	Cost Center	Ledger Account	Program	WD Project ID	Gift	Grant
Transfer to:							

Date Out	Printed Name	Signature	Date
	Project Manager for Estimate		
	Associate Vice President of Facilities	Lee Myers	
	CC Manager, Dean, AVP or PI (Up to \$15,000)		
	VP or SVP (Up to \$50,000)		
	CFO or EVP (Up to \$250,000)		
	President (Over \$250,001)		
	Research Office (if grant funded)		

**OFFICIAL USE ONLY**

BUILDING CODE	WORK ORDER NO.	WD PROJECT ID	PROJECT MANAGER	DESIGNER	DATE COMPLETED

**ACCOUNTING USE ONLY**

**Non-Capital**     **Capital**    **Project Group:** \_\_\_\_\_