

Room/Move Request

Please complete the following (check all that apply):

- Move to a new room
 - Add a room Location: _____
Purpose: _____
Size Req't: _____
 - Relinquish a room Location: _____
 - Move furnishings and/or equipment
What? _____
From: _____ To: _____
 - Help moving the items listed above
 - Other _____
- Date request needs to be completed: _____

Please sign below:

_____	_____	_____
Person making the request	College/Department	Date
_____		_____
Dean of the College/Director of the Department		Date
_____		_____
Vice President for Academic Affairs		Date
_____		_____
Person who completed the move		Date

Return to the office of the Executive Vice President / CFO, Room 109.