

## Physical Resource & Space Requirements for New and Revised Academic Programs

This form is to be completed by the faculty member responsible for the program proposal in consultation with Registrarial Services and the Division of Facilities Management. Contact the Senior Coordinator of Scheduling, Registrarial Services (#4570) or Facilities Planning and Development (#4574) for assistance.

Attach the completed form to the Consultation with the Registrar form prior to submission to the Academic Programs Committee. Additional comments may be attached if required.

Nam	e of	program										
1.0	.0 Space and Renovations											
	Does the new/revised program require space resources in addition to the college/department's present											
1.1	1 space allocation?											
	No		Skip to question 1.3									
	Yes		Describe below									
	Type of space											
	Amo											
	Occupants											
	Area	or capacity										
	Special requirements											
	e.g. Fume hoods, cold rooms, A/C etc.											
	Som	e examples of typ	es of space are: classroom, office (faculty, staff, graduate student), laboratory									
	(tead	ching, research), v	vorkshop, studio, rehearsal room, field plot, animal facilities, etc.									
1 2	le th	o collogo/dopartm	ent aware of space outside of its resources which can accommodate needs?									
1.2	No	e college/departin	Skip to question 1.3									
	Yes		Describe below									
	103	<u>l</u>	Describe below									
1.3	Does	s the new/revised	program require renovations to the college/department's current space?									
	No		Skip to Question 1.3									
	Yes		Describe Below									
	Desc	c of renovations										
	Rooi	ms										
	Pres	ent use										
	Prop	osed use										
	Note - including special installations, e.g. fume hoods											
1 /	1.4 Has a Project Request form been submitted to Facilities Management for above additions or renos?											
1.4												
	No		Diagon attack a convert the form									
	Yes		Please attach a copy of the form.									

1.5	Can	development of ar	y of the	proposed	additions (	or renovati	ons be phased or comp	leted in stages?				
	No											
	Yes		Please	attach a co	opy provid	ing timefra	me and costs for each	stage				
2.0	Equipment											
2.1	Doe	s the new/revised p	orogram	require ad	ditional ed	quipment o	r upgrades to current ed	quipment?				
	No		Yes		Describ	е						
				-								
	Equi	pment required										
	Qua	ntity required										
	Estir	nated unit cost										
	Estir	nated total cost										
,	Note	e - whether the inst	allation	of equipme	ent will req	uire additio	onal space or renovation	ns, or if there are				
	special electrical, cooling, ventilation, plumbing, etc. requirements.											
0.0	_	•	_	_	_	_						
		ding						10				
3.1			availabi	le for the re	quired ne	w space, re	enovations or equipmen	.t?				
	_	l costs	l									
	No	<u> </u>	Yes									
	_	oing operating/mai		ce costs?								
	No		Yes									
32	Are funds avaialable from non-base budget/external sources towards the cost of any of the new space, renovations, or equipment?											
0.2		al costs										
	No		Yes									
		oing operating/mai		ce costs?								
	No	 	Yes									
			1.00	<u> </u>								
3.3	Will	there be a request	to the C	Capital Plan	ning Com	mittee for	capital funds to accomm	nodate the program?				
	No		Yes									
4.0	Add	litional commen	ts									
	If relevant, please comment on issues such as adequacy of existing physical resources for delivering the											
4.1	prop	osed program, the	feasibil	ity of propo	sed additi	ons or ren	ovations, sources as fur	nding, etc.				
,												
,	Ass	ociate Registrar		-			Date					