

## Space Request Form

**Submission Deadline:  
February 2, 2024**

<b>This section to be completed by Facilities Management only.</b> If you have any questions regarding the completion of this form, please contact Janet Sauriol at 7199 or Teams		Request No:	
Submit to:	saurioj@algonquincollege.com	Received:	

### 1. Client Information

Academic School / Admin. Department:		Dean / Director:	
Academic Department / Admin. Division:			
Contact:		Phone:	
		Email:	

### 2. Description of Activity or Need

<b>Title:</b> <i>(Provide a short title for future referencing of the request)</i>			
Campus:		Affected Room(s): <i>(If applicable)</i>	
Space Needed By: (Month / Year) <i>Focus is implementation in FY 25/26 and beyond</i>		Duration of Space Need: (Long-Term; Temporary-Months)	
Classification of Request: <i>(Alteration / reconfiguration of existing activity or space; Expansion of existing activity; space for new activity; Other-Describe)</i>			
Description: <i>(Summarize the activities and functions to be accommodated by the request).</i>			
Summarize the issues and rationale for the space request. <i>Be as detailed as possible as the information provided here will be used to prioritize the request in consideration of all College needs</i>			

### 3. Indicate Criteria That Aligns with the Space Request: (Check **one** box only)

<input type="checkbox"/>	Legislative Requirement <i>(The space request is required in order to meet legal, compliance, regulatory or contractual mandates)</i>
<input type="checkbox"/>	Strategic or Development Plan <i>(The space request aligns with the College's overall strategies; Learner Driven; Innovation and Quality; Connected; Sustainable; People)</i>
<input type="checkbox"/>	Academic Initiative that Accommodate Enrolment Growth and Build Capacity <i>(The space request is required for new/amended programs; new labs, classroom / increase capacity; etc.)</i>
<input type="checkbox"/>	Staff or Service Function <i>(The space request is an accommodation requirement)</i>

### 4. Provide Details as it Relates to the Following Criteria: (Fill in only the ones that are applicable)

How does this space request align with the College Business Plan / Strategic Plan
How does the activity generate revenue for the College. <i>NOTE: If your space request is revenue generating, you are required to fill in the attached ROI Form</i>
Describe the urgency of the request: <i>(eg. Activity will not run without this project; Impact if request is not completed)</i>

Describe how this request improves space optimization

How does the request support online activity or work from home policy

Describe how this request improves service to Clients and/or efficiency of college operations

Describe how this request improves quality of the learning environment

## 5. Funding

Identify any funding that may be available to support this activity

## 6. ACET Member Endorsement

Confirmation of ACET Member Endorsement
<input type="checkbox"/> I affirm that this space request has been reviewed and endorsed by the appropriate Vice President for submission.