

Facilities and Services Division – Space Management

1 SPACE REQUEST FORM

1.1 Requestor Information

Date:	
Details of person requesting space:	
Name:	
Position:	
College, School, Division, Student Group, etc:	
Phone:	
Email:	
Details of person authorising this request: <i>(Dean / GM / Director or equivalent)</i>	
Name:	
Position :	

1.2 Current Space

Building Name and No:	
Room Numbers:	

1.3 Space Need

When is the space needed?	
How long is the space needed for?	
Type of space needed e.g. office:	
How much space do you need? <i>e.g. number of people and/or items required to be accommodated</i>	
Will any space you currently occupy be returned to the University for re-allocation?	
What is likely to occur if a space cannot be allocated, i.e. impacts?	

Office-Use Only

Date request received:	
Assigned for Action: <i>(Name and Date)</i>	