



Space Allocation Request Form

Date of request: _____ Date space needed by: _____

Space assignment to be made to: _____
(dept, agency, etc.)

For occupancy by: _____
(name of individual, club, organization)

Reason for request: _____

Space requests:

Bldg/Room Number(s):

_____ New _____ Additional _____ Move**

**If this is a move, please give present location(s): _____

Furniture needs:

1. List furniture needed for space: _____

2. Is this furniture being moved from present location? _____ (Y/N)
o If not, give present location of furniture: _____

3. Approximate quantity of boxes, etc. to be moved: _____

Other needs:

- Will telephone service be needed at this location? _____ If yes, once your Space request has been approved you will be responsible to complete the Telephone Request form online at Administration/Business Services/Telephone Information and Documents.
- Will a computer network hookup be needed? _____ If yes, once your Space request has been approved you will be responsible to contact the Technology Resource Center at extension 6111 or helpdesk@smsu.edu to request a computer hookup in the location.

Note: Please attach a completed Key Request to this form. If your Space request is approved the key request will be processed. Keys for any vacated space should be turned in to the Physical Plant office when new keys are picked up.

Signatures (please circle "approval" or "disapproval"):

Department Chair/Supervisor
Or Advisor Approval/Disapproval:

_____ Date: _____

Area Dean/Vice President Approval/Disapproval:

_____ Date: _____

STUDENT GROUPS & ORGANIZATIONS ONLY – Please note whether club or organization is officially recognized. Y or N

Assistant Director of Student Activities Review:

_____ Date: _____