Texas Tech University Construction/Renovation Approval Form

Customer Information		
College/Department		
Requestor Name		
Requestor Title		
Requestor Email		
Requestor Phone Number		
Project Number:		
Project Number Assigned By: Construction	FP&C, Engineering Services, or Building Maintenance &	

Step 1 – Strategic Justification		
Provide a brief description of how the project will align with Texas Tech Universities Strategic Objectives, benefit the College/Department, and/or resolve current space limitations.		

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Step 2 - Space Overview		
Current Space Type	Classroom Space Class Laboratory Space Research Space Office Space Other	
Will the space be considered E&G?	Yes	No
Estimated ASF		
If the space is not considered E&G ther to	n provide a description of t Step 4 - Funding.	he space below and continue
Space Description (H	lousing, Hospitality, Ath	letics, Etc.)



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Ste	p 3 – Space Details (Education & General)	
Provide a list of Buildings and Rooms included in the renovation and provide a scope of work for each space.		
Building(s)/Room(s)		
Scope of Work		



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Step 4 - Funding		
Are funds available?	Yes	No
FOP		
What is the amount available?		

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Texas Tech University Construction/Renovation Approval Form Step 5 - Approval Routing

Dean/Department Head		
Name	App	rove
Title	Yes	No
Signature	Date	

Space Allocation Committee		
Name	App	rove
Title	Yes	No
Signature	Date	

Chief Financial Officer		
Name	Approve	
Title	Yes No	
Signature	Date	

Provost	
Name	Approve
Title	Yes No
Signature	Date

President	
Name	Approve
Title	Yes No
Signature	Date