

Space Request

This document provides program directors and their representatives a mechanism for submitting a single request for space at the Northern Virginia Center (NVC) or for an aggregate of several requests. While we encourage a clear discussion of your request, we also require a concise account – not to exceed five pages – using this template, including any clarifying diagrams that you may attach.

Evaluation Process: Requests must be submitted to the Director of the Northern Virginia Center. The Director will present the request to the Northern Virginia Center Space Committee for evaluation and selection among the current requests. The committee will examine the request and render a recommendation based on the evaluation criteria.

Evaluation Criteria: In general, space requests are evaluated based on:

1. impact to the program(s)
2. impact to Northern Virginia Center as a whole, and
3. potential for return (i.e., financial, productivity, or public relations exposure) for the University, Virginia Tech in the National Capital Region, Northern Virginia Center (NVC), and specific programs.

Those requests that best demonstrate their potential for serving the University’s goals (e.g., Top-30 research institutions), National Capital Region’s interdisciplinary goals (e.g., Footprint or SIF initiatives), and/or specific programmatic goals (e.g., improving instruction quality for a broader audience) will be preferred in the evaluation and selection process.

Please cite specific parts of the relevant strategic plans. Given that NVC cannot budget for transition costs for space (e.g., costs for renovation/construction, and the like), if there are transition costs, please include a description of them and the sources for the funds (along with the cognizant authorization signatures).

BASIC INFORMATION			
Name of Requester			
Telephone		E-Mail Address	
Department/Center ORG Code	VTLCI/#063901		
Type of Space Requested Office? Y <input type="checkbox"/> N <input type="checkbox"/> Research? Y <input type="checkbox"/> N <input type="checkbox"/> Classroom? Y <input type="checkbox"/> N <input type="checkbox"/>	FOR OFFICE SPACE:		Name(s):
			Title(s)
			Position #(s):
			Expected Hire Date(s):
	FOR RESEARCH SPACE:		Name(s):
			Title(s):
			SSN or Position #(s):
			Funding Code(s):

What mission does the space request serve? Instruction <input type="checkbox"/> Research <input type="checkbox"/> Outreach <input type="checkbox"/>	FOR RESEARCH SPACE: Provide amount, type and purpose of equipment to be housed there.	
	FOR CLASSROOM SPACE: Provide purpose of classes, the number of students per class, the number of classes to be offered, and the days and times you plan to offer classes.	

REQUIREMENTS

How much space do you need?	
How do you expect to use the space?	
How many hours per week will the space be occupied?	
How many people will occupy the space?	
Dates space will be needed	

DESCRIPTION OF THE SPACE NEED

Please provide a detailed description of the situation that leads to the need for space at the Northern Virginia Center.	
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BENEFITS/VALUE OF THE REQUEST

Describe how the space allocation could alleviate the situation described in the introduction. Discuss how the university, NVC and/or the program will benefit from the new space allocation.	
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REQUIRED SIGNATURES

All requester(s) and their respective department head(s) / director(s) and dean(s) are required to sign the form. If the request requires resources (i.e., funding) from other relevant parties within the organization, these cognizant parties must also sign. By signing, all parties certify that appropriate space, transition funds, faculty time, and equipment are available.

Program Director			
	Print	Sign	Date
Department Head			
	Print	Sign	Date
Dean			
	Print	Sign	Date

NOTES/COMMENTS BY SPACE COMMITTEE

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RECOMMENDATION OF SPACE COMMITTEE

Initials of Committee Members:

FINAL ACTION