Please scan and email the completed form to Facilities Management [fmadmin@ben.edu](mailto:fmadmin@ben.edu)

* Complete this form for all relocations and space requests with all authorized signatures prior to the requested relocation date.
* Our University Facilities Committee will review all space request forms for approval.
* If the requested relocation date cannot be accommodated, the requestor will receive notification.

**Date of Request**:

**Employee Information:**

Employee Name (New/Relo): PeopleSoft ID Department Title

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

Email (If available) Phone Number (If avail.)

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Include in Staff Directory: | Update Staff Directory: |

**Space Use**

|  |  |
| --- | --- |
| 1. New faculty/staff: | Yes No If Yes, start Date: |
| 2. Existing faculty/staff: | Yes No Relocation request date: |

**Space Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Existing Location | | Preferred New Location *(Complete for Relocation Only)* | |
| Building | Room/Loc Number | Building | Room/Loc Number |
| Choose an item. |  | Choose an item. |  |
| Move existing computer(s) and phone(s): | | Provide new Computer(s) and phone(s): | |

**Requesting Department**

Manager Requesting Space Title

|  |  |
| --- | --- |
|  |  |

Department Email Phone Number

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Special Notes**

|  |
| --- |
|  |

**Space Relocation Justification**

|  |
| --- |
|  |

**Requestor’s Check List:**

**IT (new equipment or relocation of computer, phone, & mobile devices)** - IT equipment please reach out directly to IT [helpdesk@ben.edu](mailto:helpdesk@ben.edu).

**Crate Request**, how many? 0. Return crates within one week of your move. Enter a [work order](https://adfs.ben.edu/adfs/ls/idpinitiatedsignon.aspx?loginToRp=https://benu.famis.com/mvc/sso/saml/login) for pick up.

**Key requests**- visit the office of Facilities Management in the parking garage to obtain a key request form, requires supervisory sign-off.

**Office and Cubicle Signage** – Office Signage: fill out the following form [Office Name Plates](http://www.ben.edu/facilities-management-planning/planning-construction/signage.cfm), or cubicle signage email request to [fmadmin@ben.edu](mailto:fmadmin@ben.edu).

**Special Furniture requests** will need to be approved through campus planning, please enter a [work order](https://adfs.ben.edu/adfs/ls/idpinitiatedsignon.aspx?loginToRp=https://benu.famis.com/mvc/sso/saml/login).

**Art gallery** (art removal) – Contact [tparker@ben.edu](mailto:tparker@ben.edu) for art removal.

For additional move information please visit our Facilities Management and Planning website [here.](mailto::fmadmin@ben.edu)

**AUTHORIZATION:** (All signatures are required for final approval)

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Supervisor / Manager Date Academic Dean / Director Date

**CAMPUS PLANNING OFFICE USE ONLY:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

University Facility Committee Review Date Facilities Management (Bryan Goodwin) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provost (Academic Only) Date Chief of Staff Date