



FORM CS 1: PHYSICAL SPACE REQUEST FORM

Name of the department:	
Requester:	
Department Approver:	
Contacts/Email/Ext:	
The nature of physical space required	Specify the nature of the physical space required e.g. teaching, office, for meeting etc.
Date of the request:	
Due date (if applicable):	
Objective: Space Description (including capacity, labelling, campus/location, compliance requirements, if any, etc.)	
<u>Recommendation:</u> Manager, Central Services: _____ Comment: _____ Signature: _____ Date: _____	
<u>Approval:</u> DVC, Finance, Planning and Development: Comment: _____ Signature: _____ Date: _____	