



Facility Enhancement Project Request Form

School/Facility: _____

Date: _____

Request Submitted by: _____

Position: _____

Estimated Completion Date: _____

Description of the facility enhancement project:

Implications for Facilities Department:	Estimated Costs
Items for disposal:	
Electrical work:	
Plumbing work:	
Carpentry work:	
Other:	

Implications for Technology Department:	Estimated Costs

Implications for School:	Estimated Costs

Cost Sharing	Amount
Facilities	
Technology	
School	
Total Cost	

Signatures:

Director of Facilities : _____ Date: _____

Director of Technology: _____ Date: _____

Secretary Treasurer: _____ Date: _____

School Principal: _____ Date: _____

NOTE: Any changes to the scope of the project must be agreed to by all signatories, noted and initialed as addendums.