CPAC Project Description and Budget

MONTH YEAR

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| Project Title | Name of Project (Building Name-Room or Area-Work Being Performed)  Example: Carver Hall-Room 0160-Remodel | | |
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| Project Type | (Remodel, Repair, New Construction, Renovation, etc.) | | |
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| Previous CPAC Action | Example: Approval to proceed with planning and fundraising received February 2018 | | |
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| Requested Action | Example: Approval to proceed with construction | | |
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| General Description of Project | Description of the work, include the following:   * *Project size (sq ft) and location* * *Scope of work* * *Relocation of existing occupants / reallocation of space* * *Estimated total deferred maintenance removed through renovation or demolition* * *Project alternatives explored* * *Relationship to other capital projects (if any)* | | |
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| Justification/Need for project | Describe how the proposed project will:   * *Meet the programmatic or activity requirements* * *Support faculty, students, and staff* * *Address environmental health or safety concerns* | | |
|  |  | | |
|  | *If project to be submitted to Board of Regents for approval, complete the following table; if not, do not complete and delete.* | | |
| Board Evaluation Criteria | Does this project help fulfill the institution’s mission and strategic plan through: | | |
|  | |  |  |  | | --- | --- | --- | |  | **Yes** | **No** | | 1. Faculty needs |  |  | | 1. Program accreditation |  |  | | 1. Student demand |  |  | | 1. Environmental health or safety |  |  | | 1. Self-supporting auxiliary needs |  |  | | 1. Other strategic plan-related criteria |  |  | | | |
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| Proposed Functions/  Occupants of Space |  | | |
|  |  | | |
| Project Budget with Source(s) of Funds | Total project budget, name of the fund source(s) (Dept), and account number  Example: $2,000,000 PG XXXXXX (XXX – GUAC – AAS) | | |
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| Future Phases of the Project (if any) |  | | |
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| Schedule | Anticipated schedule for design and construction | | |
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|  | *For New Construction or Major Additions Only: (if not required, delete the next two sections)* | | |
|  |  | | |
| Estimated Increased Annual Operating Budget and Source of Funds | Estimated costs, name of fund source(s) (Dept)  *(Include utilities and building operational costs such as custodial services, security, and environmental health and safety)* | | |
|  |  | | |
| Estimated Annual Building Renewal and Source of Funds | Estimated costs, name of fund source(s) (Dept)  *(1.5% x [original Design + Project Management + Construction Costs])*  *(Includes life-cycle maintenance, minor repairs and future major repairs. Does not include furniture, IT equipment or other movable equipment.)* | | |
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| Location Map | Insert location map | | |
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| Requested By: | |  | Requested By: |
|  | |  |  |
|  | |  |  |
| Requestor (Print)  College/Unit | |  | Provost/SVP or Equivalent (Print)  University Division |
|  | |  |  |
|  | |  |  |
| Requestor (Signature | |  | Provost/SVP or Equivalent (Signature) |
|  | |  |  |
|  | |  |  |
| Date | |  | Date |

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| President Approval Date: | |  |  |
|  | | | |
| Comments or Action: |  | | |
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| Optional Attachments:   * Plan * Detailed program description * Financial analysis (particularly if financing is proposed – student fees, internal loan fund or gifts) * Other support documentation | | | |