## Facilities Request Form

## #6

## COMPLETE

Collector: Live Link (Web Link)

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Page 1: Please submit one form per request.

Q1 Contact Person

Name Julie Godfrey

Email Address julie.godfrey@gcccd.edu

**Q2** Department

**EHSM** 

Q3 Fiscal Year of Request 2018-2019

**Q4** Title of Request

Move Department Store Room

**Q5** Location of Request

F-519

**Q6** DescriptionPlease provide a brief description of the space or items being requested.

To swap storage rooms from F-726 to F-519 so our storeroom is accessible during class sections. Currently the Survey department has an adjoining store room to the F-724 as well as our department. We are in competition for the class room space. Both departments rely heavily on having the attached storeroom to facilitate lab activities. F-519 is currently storing the dissolved Solar Energy class equipment and could be swapped to F-726 to allow us to use F-620 in conjuction with F-519

## Facilities Request Form

**Q7** Please provide the justification for the request, discussing the following: How will the request (and associated program review goal) support the College's mission and strategic priorities? Does the request address any health, safety, or security issues? Ir so, please describe them. What do program or service area data indicate with regard to growth in increased demand for services? How will the request advance the continuous quality improvement of the department or work area?

Currently the Survey and EHSM department has seperate adjoining store rooms to the F-724. We are in competition for the class room space and as our departments grow are no longer able to share the area based on time constraints. Both departments rely heavily on having the attached storeroom to facilitate lab activities. F-519 is currently storing the dissolved Solar Energy class equipment and coulc be swapped to F-726 to allow us to use F-620 classroom in conjunction with F-519 storeroom.

Q8 What is the estimated one-time cost of the request?	Respondent skipped this question
Page 2	
Q9 Contact Person	Respondent skipped this question
Q10 Department	Respondent skipped this question
Q11 Fiscal Year of Request	Respondent skipped this question
Q12 Title of Request	Respondent skipped this question
Q13 Location of Request	Respondent skipped this question
Q14 DescriptionPlease provide a brief description of the space or items being requested.	Respondent skipped this question
Q15 Please provide the justification for the request, discussing the following: How will the request (and associated program review goal) support the College's mission and strategic priorities? Does the request address any health, safety, or security issues? Ir so, please describe them. What do program or service area data indicate with regard to growth in increased demand for services? How will the request advance the continuous quality improvement of the department or work area?	Respondent skipped this question
Q16 What is the estimated one-time cost of the request?	Respondent skipped this question