

**SOUTH DAKOTA STATE UNIVERSITY
PROJECT DEVELOPMENT INITIATION REQUEST**

Proposed Project Title:

Date Submitted:

All projects for the construction of new facilities and new uses of University land as well as facilities additions, renovations and/or capital improvement projects must be approved prior to being presented to or discussed by advisory groups, prospective donors, or any other organization outside SDSU. The following information and authorizations are needed in order to commit University planning and fundraising resources and to provide appropriate coordination.

Description of Project:

Project Type: New Building Major Remodeling Site work Utilities Improvement
 Building Addition Other Construction Equipment Replacement

Does your project require legislative approval?
 Yes No I don't know Done (Yr: _____ # _____)

Preliminary Budget:
 \$ _____

Proposed Schedule:	Start	Finish
Initial Planning	_____	_____
Fundraising	_____	_____
Design	_____	_____
Construction	_____	_____

Completion Date: _____ What is the rationale for this date?

Project Location: _____

Is the space involved in this project assigned to your department?
 Yes No

Are you changing the use of any space ?
 Yes No

Are you adding any new space?
 Yes No

- Programming and Alignment (Attach documents and narratives)
- Relationship to Mission, Strategic Plan and Campus Master Plan
 - Discussion of Alternatives Considered
 - Impact to Academic Programs
 - Impact to Research
 - Existing and Projected Resources in the following areas: 1) Personnel 2) OE—Operating Expenses 3) Equipment
 - Summary of Existing Space Inventory (as well as Proposed Space Plan)

Proposed Source of Funds:	Fund Type	Fund #	FY
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Department Accounting Person: _____

Any Additional Information:

Department Contact (signature required) _____ Date_____

Department Head (signature required) _____ Date_____

Dean (signature required) _____ Date_____

Infrastructure/Utility Implications: _____

Revised Project Estimate:
\$ _____

Comments:

Physical Plant Director Signature _____ Date_____

Requires Board of Regents Approval Requires Legislative Approval

Comments:

Executive Vice President Signature _____ Date_____