

F&S Matching Project Funds Application Form

(Send this form to the Associate Vice President for Administration and Finance (Facilities & Safety). Attach the approved Minor Project Request Preliminary Review Form and the contractor bid information with this submission.)

Project Name: _____

Minor Project #: _____ **Telephone #:** _____

Requester: _____ **Email:** _____

Department: _____ **Funding dept. #:** _____

Summary of all costs: Please provide backup documentation for each category and ensure that the numbers match.

Design cost: _____

Construction Cost: _____

UCF IT Cost: _____

OIR Cost: _____

BCO/SFM/FPC Cost: _____

Other Costs (describe): _____

Total Project Cost: _____

\$s spent to date by the College/unit on this project (including professional services): _____

Funding \$ Requested: _____ **Funding \$ dept. will commit:** _____

Commitment to fund the project: (Dean/director signature approval)

_____ **Date:** _____

Purpose of the project:

Project Name: _____

Original and (new) intended use of the space:

Life Safety implications:

Benefits of the project: *(appropriate use of space and resources; contribution to improving the life of the building/building systems; enhancement of campus environment; impact on curriculum; impact on students; increased space utility; number of people impacted; other)*

Implications if not funded by the match: