UVA Medical Center Space Request Form

 $Complete \ the \ highlighted \ fields \ below \ and \ return \ to \ Michael \ Payne \ at \ MPAYNE @virginia. edu \ in \ Facilities \ Planning \ \& \ Capital \ Development$

Requestor Name Requestor Title	1.	contact information	
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Requestor Phane		Requestor Title	
Department Name Department Name Department ID Number Service Line Chief		Requestor Email	
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By when is the space needed?			
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. Space Need Details		
How many people does this space need to accommodate?		
How many private offices? (Name, Job Title)		
How many shared offices? (Name, Job Title)		
How many are existing FTEs/Where do they work now?		
How many are new FTEs?/When will they start?		
Are staff working remotely, onsite or observing a hybrid model?		
Is conference, teaching or meeting space needed?		
Is private breakroom space needed?		
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Provide list of current space holdings (Building, Room #, Function)		
List all equipment that will be needed in the new space and notate any that require emergency power.		
Notes/Comments/Additional Information		
notes/ Comments/ Additional information		
Outside of people, space is the Health System's greatest asset. Space is limited with many competing interests. Before you grow your team, add a new program or buy a new piece of equipment, please consider reaching out to Facilities Planning & Capital Development to make certain the space is available or that it suits the planned usage. We are here to help and welcome an opportunity to become involved in space discussions as early as possible.		

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