**OBJECTIVE**

- To insure that all external reported data is updated and accurate:
  1. Facilities Inventory & Utilization Study
  2. Institutional Profiles
  3. Fact Book Data

- Benchmark assessment template to evaluate and measure the successful usage of campus research labs, teaching labs, classrooms, and office areas.

- Establish a committee review process that provides for effective utilization of campus assets.
**MISSION**

All University buildings and land belong to the University as a whole and are subject to assignment and reassignment to meet the institution's overall priorities and needs. The University Space Committee, which is chaired by the Provost and Vice Chancellor for Academic Affairs, approves all allocations of university space including off-campus rental space. Assignments are made after careful consideration of all relevant factors and consultation with the units involved. Each College and Division will establish a Local Space Committee to consider and prioritize local needs and discuss space requests to be made to the University Space Committee. The Local Space Committee will assure that all avenues to solve a space request within the college/division have been explored before forwarding a space recommendation to their respective Dean or Vice Chancellor.

*University Space Regulation - REG 09.01.13*
September 1 2013
## Members

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Office</th>
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<tbody>
<tr>
<td>Dr. Joe B. Whitehead, Jr.</td>
<td>Provost and VC for Academic Affairs</td>
<td>Office of the Provost</td>
</tr>
<tr>
<td>Mr. Robert Pompey</td>
<td>VC for Business and Finance</td>
<td>Division of Business and Finance</td>
</tr>
<tr>
<td>Dr. Barry L. Burks</td>
<td>VC for Research and Economic Development</td>
<td>Division of Research and Economic Development</td>
</tr>
<tr>
<td>Mr. Andrew M. Perkins, Jr.</td>
<td>Associate VC for Business and Finance/Facilities</td>
<td>Division of Business and Finance</td>
</tr>
<tr>
<td>Dr. Sanjiv Sarin</td>
<td>Vice Provost for Research, Graduate Programs and Extended Learning and Dean, Graduate School</td>
<td>Office of the Provost</td>
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09.01.2014
North Carolina Agricultural and Technical State University

NC A&T State University Space Committee

09.01.2014

Support Staff

Mr. William J. Barlow, Jr.  Director of Design & Construction  Office of Facilities

Mr. Stephen A. Sutton  University Architect  Office of Facilities

Mr. James T. Griffin  Real Estate Purchasing Specialist  Office of Facilities

Dr. Scott Jenkins  AVC for Academic Affairs  Office of the Provost

Ms. Alice C. Stewart  Interim Vice Provost for Strategic Planning and Institutional Effectiveness  Office of the Provost

Mr. Alton Rucker  Social / Clinical Research Specialist  Office of the Provost

Mrs. Deborah Mayhand  Technology Support Technician  Registration and Records

Mr. Reggie Stewart  Facility Space Planner  Office of Facilities

Mr. Robert Johnson  Interim Associate Director for University Event Center  Office Of Student Affairs
**Local Space Representatives**

<table>
<thead>
<tr>
<th>College of Arts &amp; Sciences -</th>
<th>Dr. Goldie S. Byrd (Dean)</th>
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</thead>
<tbody>
<tr>
<td>College of Engineering -</td>
<td>Dr. Robin N. Coger (Dean)</td>
</tr>
<tr>
<td>School of Agriculture and Environmental Sciences -</td>
<td>Dr. William Randle (Dean)</td>
</tr>
<tr>
<td>School of Business and Economics -</td>
<td>Dr. Beryl C. McEwen (Dean)</td>
</tr>
<tr>
<td>School of Education -</td>
<td>Dr. Miriam L. Wagner (Interim Dean)</td>
</tr>
<tr>
<td>School of Graduate Studies -</td>
<td>Dr. Sanjiv Sarin (Dean)</td>
</tr>
<tr>
<td>School of Nursing -</td>
<td>Dr. Inez Tuck (Dean)</td>
</tr>
<tr>
<td>School of Technology -</td>
<td>Dr. Benjamin O. Uwakweh (Dean)</td>
</tr>
<tr>
<td>Library Services -</td>
<td>Ms. Vicki Colman (Dean)</td>
</tr>
</tbody>
</table>

Recommend 2 or 3 people (e.g. Building Representative)
Recommend 2 or 3 people (e.g. Building Representative)
NC A&T State University Space Committee

- **Space Goals**

  1. Responsibility: The University Space Committee makes all allocations of university space.
  2. Transparency: Activities of the University Space Committee will be transparent. Meeting agendas, meeting minutes and the status of all requests will be available for review.
  3. Local Space Committees: Each College and Division will establish a Local Space Committee to consider and prioritize local needs and discuss space requests to be made to the University Space Committee.
  4. Making A Space Request: All requests for new space, reallocation of space, or change in use of space will be made by completion of a Space Request form and submission to the University Space Committee. Persons making requests may appear before the University Space Committee.
Space Goals

5. Compact Plans: Each unit’s Compact Plan should identify future space needs.

6. Capital Improvements: All capital improvement proposals which create new space or change use of existing space will be reviewed by the University Space Committee prior to consideration by the Executive Officers.

7. Sponsored Programs: All proposals for external funding must resolve space needs prior to the implementation of an award.

8. Assessing Space Requests: The process for reviewing space requests at the local and university levels will be guided by:

   8.1 Space should support the overall educational mission of the university and unit.

   8.2 UNC-OP space standards will be used as the benchmark for assessing type and quantity of all space allocated.
I. Requester:

Department __________________________ College/Division __________________________

II. This request reflects a need for:

☐ Change in the use of existing space

Building: __________________________ Room No. __________________________

Current Use: __________________________ Proposed Use: __________________________

☐ Allocation of additional space

☐ Existing Space will be vacated if this request is approved.

Building: __________________________ Room No. __________________________

III. Type/Quantity of Space Needed: Please provide information on the type(s) of space being requested and the number of people to be supported. The amount of space required to meet the request will be calculated based on the UNC system space standards.

☐ Classroom: How many student seats?

☐ Preferred seating type?  ☐ Fixed ☐ Moveable

☐ Preferred seating layout?  ☐ Auditorium ☐ Tables/chairs ☐ Tablet armchairs

☐ Teaching Lab: Complete Attachment A

☐ Research Lab: Complete Attachment A

☐ Office:

Type of Position
Director/Administrator
Faculty
Technical/Clerical
Graduate Assistants
Student Workers

<table>
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<tr>
<th>Type of Position</th>
<th>Number of Rooms</th>
<th>Number of People</th>
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☐ Office Service (copier, files, mail boxes)

☐ Conference Room: seating capacity?

☐ Storage/Warehouse: ☐ Conditioned ☐ Unconditioned

☐ Other: __________________________ Sq. Ft.

IV. Time Frame: The requested space is needed:

☐ Temporarily beginning __________________________ and ending __________________________

☐ Permanently beginning __________________________

V. Request Details: Attach a detailed narrative that follows the below format:

1. Description: Provide a succinct description of your space request. What is being requested and why?

2. Compact Plan: How does this request relate to your Compact Plan?

3. Proximity: Indicate other departments, organizations, programs, or functions which should be in proximity to the requested space and why.

4. Location: Indicate any location(s) you want considered in filling this space request.

5. Options explored: Provide assurance that all avenues to solve this space requirement within existing space have been explored. For example, has the department/college considered maximizing underutilized space to solve this need? Has the department and college re-evaluated the space assigned to lower priority initiatives? What possibilities for shared space have been explored?

6. Timing: Describe any programmatic issues affecting the timing of your move such as the need to move during a class break, at the end of a semester, during summer months, coincident with another activity, etc.

7. Parking/Transportation: Describe any special parking and transportation access needs. It is assumed that standard University parking and transit service levels will be needed for faculty, staff and students.

8. Funding: Provide funding details for any request that requires the expenditure of funds. Rental space requests should include the lease duration, square footage, annual cost, and financial accounting information.

9. Other: Any other information that will support or better defines this space request.

<table>
<thead>
<tr>
<th>Submitted/Endered by:</th>
<th>Name of Department/Unit Contact Person</th>
</tr>
</thead>
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</table>

Signature of Dept/Unit Head (date) __________________________

Signature of College Dean or Vice Chancellor (date) __________________________

Signature of College Facilities Coordinator (date) __________________________

Submit request to the University Space Committee Representatives, c/o Facilities/Space Planner Questions: call Reggie Stewart, Space Planner, rswewart@ncat.edu, (336) 286-4564

Space Request Form
Rev. 09/01/2011 10
### NC A&T State University Space Committee

**North Carolina A&T State University**  
Space Request Form – Attachment A

#### Teaching Lab
- Number of student seats: [ ]
- Number of computers: [ ]

**Lab type:**
- [ ] Wet
- [ ] Dry

**Hazards:** List all chemical and physical hazards, such as lasers, corrosives, drill press, etc. Attach a separate list, if necessary.
- Chemicals (list):
- Processes and specific hazards (list):
- Fume Hoods: Number/Size

**Waste (specify):**
- [ ] Liquid
- [ ] Dry
- [ ] Biohazard
- [ ] Radioactive

**Amount (volume/week):**

Are operations covered by an existing safety plan?  
- [ ] Yes  
- [ ] No  
Approval #: __________

#### Research Lab
- Number of workstations: [ ]

**Lab type:**
- [ ] Wet
- [ ] Dry

**Hazards:** List all chemical and physical hazards, such as lasers, corrosives, drill press, etc. Attach a separate list, if necessary.
- Chemicals (list):
- Processes and specific hazards (list):
- Fume Hoods: Number/Size

**Waste (specify):**
- [ ] Liquid
- [ ] Dry
- [ ] Biohazard
- [ ] Radioactive

**Amount (volume/week):**

Are operations covered by an existing safety plan?  
- [ ] Yes  
- [ ] No  
Approval #: __________

---

**Research Contract or Grant Number:**  
**Contract/Grant Effective Dates:**  
**Total $Amt. of Agreement:**

Submit request to the University Space Committee Representatives, c/o Facilities/Space Planner
Questions: Call Reggie Stewart, Space Planner, reguest@ncat.edu (334) 285-4304

Space Request Form  
Rev. 09/01/2011