

Phone (+63 85 ) 341-3249 (+63 85) 342-3047 (+63 85) 341-2296 Fax (+63 85) 342-1079 URL: http://www.carsu.edu.ph Email address: op@carsu.edu.ph



Request No: \_\_\_\_\_

## SPACE REQUIREMENT, UTILIZATION, AND DESIGN CONCEPT & SPECIFICATION

Name of End-User:		Date:					
Department/Office:		Position/Designation:					
Title of the Project:		Proposed Location:  Location conforms to University's LUDIP?  Yes					
Project Information							
This request reflects a need for:	☐ Change in the use of existing space		space				
Project Type:	□ New □ Extension □ Renovation/Repair						
Facility Type:	□ Academic □ Administrative □ Sports/Recreational     □ Others, Please specify						
Project Driver:	Please check all that applies.  ☐ Research Grant ☐ New Curricular Program ☐ Work environment needs improvement ☐ Inadequate space to accommodate current program ☐ Others, Please specify						
Project Rationale and Stakeholders:	Describe how this change will align to the University's VMGO and strategic plans. Describe who and how many will benefit by implementing this change? What considerations will need to be made?						



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## OFFICE OF THE PLANNING AND DEVELOPMENT

Space Requirement and Utilization							
Number of Storey:		Total No. of Room	s Required:	Floor Area per storey:	sqm		
Room/ Facility Type		Area (	(sqm)	Utilization/Justification			
	S	ketches, Design Pl	ans, or Additional	information			
Received by:	<b>.</b> .			Reviewed by:			
	Signat	ure over Printed No	ame & Date	Signature over Printed N			
Evaluated by:				<ul><li>☐ Actions Taken on the Requ</li><li>☐ Accepted</li></ul>	ıest:		
				☐ Rejected, reason:			
	Signat	ure over Printed No	ame & Date				
Approved By:							
		Director, OPD					