PROJECT SCOPING Project Name

Meeting date

Summary Information:	
Project Name:	
Sponsor (School/Dept):	
School Representative:	
Capital Planner:	
Project Manager:	
Projected Timing:	Notes:
Estimated Cost:	\$ Notes:
Estimated Gross Sq Ft:	gsf Notes:
GUP Approval:	gsf
	Approved Pending N/A
Capital Plan Status:	Approved Pending N/A
Project Category:	Study Renovation Project New Construction
	Bldg Name: Proposed site:
	Bldg Number: Designated Pending
Project Description:	Include: program goals and objectives, program growth details, client
	details
Information Required:	Yes N/A
(If required, please attach)	Initial Form 1 #:
	Space utilization study
	Backfill plan
Other Information:	Yes No
	Project requires BOT approval
	Notes: Project is part of a school/area master plan
	Notes:
	Project involves Registrar's classrooms
	Notes:
	Project involves surge
	Notes:
	Project requires a Space Guideline plan
	Notes:
	Project involves furniture planning Notes:
	☐ ☐ Initial programming for this project has been completed
	Notes:
	Preliminary plan has been completed (If yes, please attach)
	Notes:

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Conditions of approval:	Include any special agreement or requirements for this project
Pending Issues:	List issues that need to be resolved, such as Cost square footage site program space charge utilities ITS environment planning land use permit or entitlement other than GUP campus planning strategic workplace planning, etc.
Next Steps:	Outline the options to be studied and the time frame for study

Signature indicates that the above is the current agreed upon project scope. Any changes to the scope need to be reviewed/approved by signatory below.

SchoolDept Representative

Capital Planner

Project Manager

Provost office (if required)

Attendees at Scoping Meeting: ***please list***

Date:_____

Date:_____

Date:_____

Date:_____