

Research Space Allocation Request Form

Please read the Research Space Allocation Guidelines before completing this form.

Please direct any questions about completing this form to the Associate Dean Research and International (ADRI) (educadri@sfu.ca)

Request Date:	Requestor:
Email:	Phone:

Section A: Occupancy Information

Occupant Names(s) and Title(s): (Include all people, including their position titles, who will use the space on a consistent basis)				
Start Date:	End Date:			
Occupant(s) of Space will be: Faculty Staff Graduate students Undergraduate students	Research Chairs Research Staff Other:			

Section B: Description of Space Use

What is the function of the space?

Office – complete section B1

Research – complete section B1 and B2

Other:______ – describe and complete section B1

Section B1

What spaces are currently assigned to the occupant? (include room numbers)		
Could the space be shared with more than one person or group?	☐ Yes	□ No
Describe the activities taking place in the space. Has this need emerged due to a ne	∍w initiative o	or funding?



Section B2

Describe the types of activities in the space:

Will the use of the space involve training of undergraduate and graduate students, and post-doctoral fellows?

Have you notified the Associate Dean Research or the Dean about your research space needs?

Please sign to acknowledge that you have read and agree to abide by the Research Space Allocation Guidelines:

Signature:

Section C: Space Requirements

Office Space: List anyspecial requirements for the requested office space:

Section D: Requestor Comments



Section E: Approvals

Assigned Space:

Start Date: _____End Date: _____

Associate Dean Research and International Additional Comments:

ADR Signature: _____ Date: _____