Building Name: ________________________________
Room Number(s): ________________________________
College/Department: ________________________________
Completed By: __________________ Date: ______

Current Space Use Code:
   (110) Classroom (Approval Required)
   (210) Class Laboratory (Approval Required)
   Other Teaching Space (Notification Required)

Renovation/Usage Change Description:

Reason/Purpose:
Teaching Space Renovation or Usage Change Approval Form

Registrar's Office Feedback

Comments

ODPA Approval

Approved: Date:

Approved By: ____________________________

Comments

Space Allocation Committee Approval

Approved: Date:

Vote Count: ____________________________

Comments