



Space Request Form as per KGH Facility Planning Policy 05-135

Please complete and submit electronically to Michele Mahoney at :mahoneym@kgh.kari.net

Date Application Made:
Department Requiring Space:
Date Space Required:
Name of Requestor:
Number of Occupants:
For JPO Use Only
Space Identified:
Date of Move:
. Reason for request (ie. new hire, safety/risk issue, legislative compliance, etc.):
i. Amount and location of space required:
ii. Anticipated Costs (Funding Source if required):
v. Current space available?:
Date Signature of Department or Program Director