

Capital Improvement Project Application

Date: _____ Building Name: _____

Applicant name(s): _____

Phone: _____ Email Address: _____

Requested Addition/Upgrade: _____

Specific area affected: _____

Project description: _____

Benefits to the school and community: _____

Possible Schedule/Timeline Considerations: _____

Funding Source: _____ Budget Code To Fund Project: _____

Contingency plan for unexpected expenses: _____

By signing, the building administrator and applicant are agreeing with and acknowledging the following:

- Applicants are responsible for obtaining all necessary funding and support to complete the project
- The building is paying for the aforementioned project.
- A Work Order Has Been Submitted by Requesting Site to Track this Projects Costs and Labor.
- Applicants will make reasonable efforts to adhere to the project schedule.
- Completing this Project Application is not assurance that the project will receive approval.
- The project will not proceed prior to a pre-project meeting with and approval from Facility Operations.
- Further documentation may be required prior to the start of the project for volunteers, vendors and contractors.
- The District reserves the right to cancel, suspend or modify your project if it is in the interest of the District.
- Any project not completed within one year of the approval date is subject to reapplication for project approval and possible revisions.

Applicant Printed Name:

Building Administrator Printed Name:

Applicant Signature:

Building Administrator Signature:

For office use only.

Facility Operations: Approved Denied _____ Initials: _____ Date: _____

Risk Management: Approved Denied _____ Initials: _____ Date: _____

Notes: _____