NAZARETH COLLEGE MOVE REQUEST FORM

<u>Please submit this form to the Facilities Department</u> Attention: Michelle Civiletti

Last Name	First name		Phone	Email		
Dept	Title		Bldg			
Status Faculty Sta	ff New Hire F	Full Time Pa	rt time Star	t Date		
Existing Location	New Locatio	n	Date	Date Required		
Justification						
Printed Name Authorization Representative A	ApprovalVP/ DEAN/ C	DEPARTMENT HE	AD	 Date		
Signatures from Facilities	DIRECTOR FAC	CILITIES PLANNIN	- Date			
	ASSISTANT D	DIRECTOR FACILIT	TIES	Date		
**Approval signatures above d approval from the Vice Preside					on funding	
Facilities use only OFFIG	CE NEEDS					
CARPET PAINT BLI	NDS SHELVES	SIGNAGE	CLEANING	KEYS		
PHONE/DATA FURNITU	RE BOXES					
	 nents					

**ALL MOVES AND OFFICE SETUP REQUESTS REQUIRE A MINIMUM OF 3 WEEKS NOTICE.

**ALL SUMMER MOVES, NEW HIRE PREPARATION, AND OFFICE SETUPS ARE DUE TO FACILITIES BY APRIL 30TH.

**SCHEDULILNG AND TIME FRAMES OF ALL MOVES WILL BE DETERMINED BY THE FACILITIES TEAM.