



# FLORIDA STATE UNIVERSITY

FACILITIES

Information Technology

Project Request  
Form v1.2 2/27/18

***This form is used to initiate the planning process required for IT related project approval at FSU Facilities.***

**Follow the instructions at the end of this form in order to submit a completed form.**

Date:  Submitted By:

Project Title:

Requesting Department:  Project Contact:

Contact Telephone:  Contact Email:

Area Affected:      Campus Wide      Facilities Only      Other - Please provide details

**Project Type (choose one):**

New initiative - proposed new solution that is not currently being used in Facilities.

Enhancement – an upgrade or an improvement to an existing application/system.

Regulatory - mandated by FSU compliance/security office.

**Brief Description of the Project:** Explain what the project is and what needs to be done.

Has this project been approved by your Director?      Yes      No

Does this project require funding of any sort?      Yes      No

Has this project been determined to be a priority?      Yes      No

Questions about completion of this form may be directed to: [webmaster@fac-lists.facilities.fsu.edu](mailto:webmaster@fac-lists.facilities.fsu.edu).



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**Why should this project be done?** Explains what the project is expected to achieve, its benefits, and any cost savings. (Should be quantifiable.)

**Is there a Project Dependence?** Does this project require some other component or system to be involved? What other systems will this impact that you are aware of?

### To submit a completed form:

**\* Click the Submit Form button provided on the form to submit a completed form. After clicking submit, the form will be attached as a document in your email client. At that point, you may send the email.**

**Once submitted, the form will be reviewed by the IT department and you will be contacted within 48hrs to discuss further.**

**Thank you !**

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