



ST. JOHN'S
UNIVERSITY

Office of Design and Construction

SPACE/FURNITURE/MOVE REQUEST FORM

For D&C Use Only:

Date Received:

D&C Executive Director Approval:

Assigned PM:

**Please note there is a processing time of up to 2 weeks
for each request depending on volume of requests.**

Date of Request:

Type of Request:

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Office Move

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Space

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Furniture

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Renovation

Requesting Department:

Requestor's Name:

Requestor's Title:

Requestor's Location - Campus:

Request or Delivery Building/Floor/Room No.:

Requestor's Contact Information - Phone/Cell:

Requestor's E-Mail Address:

Reason for Request - Explain: (Attach photos and more information if needed)

Description of the Objectives of the Request: (If move is requested, please describe what prompted request)

VP/Dean/Director Approval Name:

Signature:

Processing Instructions: E-mail Completed and Signed Form to Lisa Barton (bartonl@stjohns.edu) and Nicole Miskiewicz (miskiewn@stjohns.edu) (Office of Design and Construction)

****ALL REQUESTS REQUIRE A PICTURE OF DAMAGED ITEM OR A PICTURE OF THE ITEM OF INTEREST AND A PICTURE OF YOUR SPACE. **REQUEST WILL NOT BE PROCESSED ONLY FULLY COMPLETED.****