



Request for Space in Project Building

Please complete this form and email it to afc@lists.olin.edu. It will be reviewed by the Academic facilities Committee, the Olin Safety Officer, the Director of Academic Services and then passed on to the Dean for final approval.

Name (person requesting and responsible for space): _____

Year of Graduation: _____ Date of Request: _____

Please list names of other project participants on rear of form.

Faculty/Staff Advisor (if applicable): _____

Project name: _____

Course Support Sponsored Research Un-sponsored Research

Club Activity Student Group Other

Project Zone Requested: (see below) _____

Dates Requested: 2013-2014 School Year _____

Brief Description of Project and of Building Space Needs (Please explicitly list known safety hazards or special infrastructure needs):

Brief Description of Project Material Decommissioning and Disposal Plan (Please explicitly list plan for all materials):

Provost and Dean of Faculty _____ Date _____

Project Participants: