## BLACK HAWK COLLEGE CAPITAL REQUEST FORM

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## **INSTRUCTIONS:**

This form shall be submitted to the Capital Committe to decide the merits of a Capital Project you are proposing (Step One), and then used to seek the funding for that project (Step Two). These projects include equipment, furniture, and other major expenditures not included in the operating budget. Capital requests are not to be captured on the budget worksheet, but rather on this form only. Approvals and funding are not guaranteed. Please complete Step One of this form and submit to your Executive Administrator. We recommend you keep a copy of this completed form for your records.

**Step One:** Complete all areas of this step and submit to your Executive Administrator. Your Executive Administrator will take it to the Capital Committee for consideration. <u>Approval only means that you are allowed to proceed to the next step and does not mean the project or the funds have been approved!</u>

Title of Capital Request:	
Date of Capital Request:	]
Description of Capital Request:	
Estimated Total Amount of Capital Request:	\$
Strategic Priority Associated with Request	
Justification for Capital Expenditure:	
Requestor Signature	
Executive Administrator Signature	
Office Use Only:	
Capital Committee Decision APPROVED DENIEL	Date

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**Step Two:** After the Committee has approved moving forward to this step, provide the following pricing and labor requirements. Then re-submit it back to your Executive Administrator for final approval from the Capital Committee.

Pricing (Please attach quo	tations)			
Construction Cost:	\$			
Furniture Cost:	\$			
Architects & Engineers Fe				
Reimbursable Expenses:	\$			
IT Related Costs:	\$			
Infrastructure Changes /N				
Ongoing Expenses	\$			
Other Costs	\$			
	φ			
Total	\$			
College Labor Requiremer	nts			
APPROVALS AND DATES				
ALL ROVALO AND DATES	•			
Executive Administrator			Date	
Executive Administrator			Date	
Purchasing Manager (if applica	hlo)		Date	
Furchasing manager (ii applicable)		Date		
Chief Information Officer (if app	licable)		Date	
Facilities Superintendent (if app	olicable)		Date	
Note: Purchasing Manager sign	nature required when request	t is \$5,000 or mo	re. Chief Information Officer must sign all	
			s requiring facilities assistance/alteration.	
Fund #:	Org. #:		Project Name:	