

FY2020 Space Survey Completion Form

I certify that we have completed the FY2020 Space Survey following the instructions provided and that all of our allocated space is accurate and up-to-date representing the Department's:

- | | |
|--|-------------------------------|
| 1) Floor Plans | 5) Functional Use |
| 2) Allocated Group(s) (Levels 5, 6, 7) | 6) Room Contacts |
| 3) Space Sub-Category (only one) | 7) Equipment (N/A) |
| 4) Employees assigned | 8) Accounts (N/A) |

College, School or Administrative Unit (Banner Org Level 3)

Org Code: _____ Org Code Description: _____

List the Org Codes for this Completion Form: (Please write neatly)

Group Member (Editor):

Name: _____ Email: _____

Signature: _____ Phone: _____

Department Chair, Dean or Director:

Name: _____ Email: _____

Signature: _____ Phone: _____

Please sign, scan and email to: Space@unm.edu
Please keep a copy of this for your Departmental records.