

**Preliminary Functional Needs Worksheet**  
Capital Project Proposal Package

University of Michigan

Please use the following worksheet to determine the functional needs of the proposed project.

**Unit:**  
**Unit Sponsor:**  
**Project Name:**  
**Date:**

**Primary Function of Proposed Project**

(select all that apply)

Instructional	Library
Research	Other
Administration	

**Project Description**

Briefly describe the proposed project. This description may match the "Proposed Solution" from the Capital Project Proposal package cover sheet.

**Types of Space Needed**

Please select space types needed. If needed, indicate person or space type count.

**Office Space**

Academic/Research Units

# of Persons

Dean	_____
Associate or Assistant Dean	_____
Department Chair	_____
Faculty, tenure track	_____
Faculty, non-tenure track	_____
Faculty, Consulting or Visiting	_____
Faculty, Emeritus (active)	_____
Faculty, Emeritus (non-active)	_____
Fellow, Lecturer, Research Assoc., Visiting Scholar	_____
Unit Administrative Manager	_____
Staff, Professional (full-time)	_____
Staff, Professional (part-time)	_____
Staff, Administrative Support (full-time)	_____
Staff, Administrative Support (part-time)	_____
Graduate Student Instructor	_____
Graduate Student Research Assistant	_____
Temporary or Student Staff	_____

Comments:

Administrative Units

Associate Vice President	_____
Director	_____
Associate or Assistant Director	_____
Manager	_____
Staff, Professional (full-time)	_____
Staff, Professional (part-time)	_____
Staff, Administrative Support (full-time)	_____
Staff, Administrative Support (part-time)	_____
Temporary or Student Staff	_____

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**Unit:**

**Project Name:**

	# Needed	Comments:
<b>Classroom Space</b>		
Accommodating 25 or less	_____	
Accommodating 26-50	_____	
Accommodating 51-99	_____	
Accommodating 100+	_____	

<b>Instructional Labs</b>		Comments:
Wet Labs	_____	
Dry Labs	_____	
Computer	_____	

<b>Research Labs</b>		Comments:
Wet Labs	_____	
Dry Labs	_____	
Computer	_____	

<b>Conference and Event Space</b>		Comments:
Conference space accommodating 10 or less	_____	
Conference space accommodating 10 - 20	_____	
Event Space	_____	

**Other, please describe (e.g. special needs for storage, maintenance, library space, food service, etc.)**