

# Machine Shop Project Request Form

**PART 1:**

Date of Request	Date Needed	
Requester	Department	Phone

	Project Name	
<b>Project Type:</b>		
Mechanical Eng Dept/ Course	College of S&E/ Course	Other, please specify:
Mechanical Eng Dept/ Research	College of S&E/ Research	_____
Project Center Team	College of S&E/ Program	

**Description of project:**

**PART 2:**

**Project Costs (To be completed by Machine Shop):**

<b>Hours</b>	<b>Parts</b>	<b>Labor</b>	<b>Total Job Cost</b>
			<b>Completion Date Est</b>

Please sign below and return the completed form to Mechanical Engineering Attn: Teodora Shuman. You will be contacted with an estimated cost and date of completion. Once the work is approved you will receive a Journal Entry from Mechanical Engineering to charge your department back for payment. You will be charged the total job cost based on the original scope of work.

**Activity string:** \_\_\_\_\_

Activity Manager Signature	Date
Please Print Your Name	Phone

**Cost Center Manager has fifteen (15) business days to process the funding form. The request will be cancelled if the form is not returned to Mechanical Engineering within this time frame.**