Fresno Unified School District

Preparing Career Ready Graduates

FACILITY MODIFICATION REQUEST FORM (FMR)

Site Name: _____ **Date:** _____

Site Project Contact: _____ **Phone:** _____

Board Approval Date:

Funding

☐ Donation	*Donor information:*
☐ Site	*Budget line*
☐ District GF	*Budget line*
☐ Grant	*Grant name/detail*
☐ Boosters	*Club name/contact info:*

Type of work requested

- ☐ New System
- ☐ Relocation/Moving
- ☐ Athletics
- ☐ Alteration/Modification
- ☐ Computer Lab
- ☐ Science Lab

Program/Department:

Purpose:

Room #'s/Area:

Requested Timeline:

Elements:
Check all that apply

- ☐ HVAC/Air Conditioning
- ☐ Electrical/Lighting
- ☐ Data/Internet
- ☐ Fire Alarm
- ☐ New Walls
- ☐ New Structure
- ☐ Install Technology
- ☐ Plumbing

***Site Plan must be attached*

General description of work being requested:

Sketch/Photos/Samples Attached ☐ Yes ☐ No

Estimate ☐ District ☐ Vendor

Project Coordinator _____

Approval

Principal _____ Date: _____

Instructional Superintendent _____ Date: _____

Executive Director/Maintenance _____ Date: _____

Assist. Supt./Facilities _____ Date: _____

Cabinet Approval (if needed) _____ Date: _____

Comments:

Requirements:

- ☐ Quote
- ☐ Informal Bid
- ☐ Public Bid
- ☐ Architect/Engineer
- ☐ DSA Review