



INTERIM BOARD APPROVAL REQUEST

To: Associate Commissioner of Real Estate & Facilities

Institution Name:		IHL Staff Use Only
Project Number:		
Project Name:		
Design Professional:		
General Contractor:		
Current Phase of Work:		

Request

Explanation/Justification

University Signatures

		Date Signed:	
		Date Signed:	

RECOMMENDATION: Board Staff recommends interim approval of this item.

FOR IHL USE ONLY

Approval by Real Estate Committee Chair

- Signature:
- Email: See attached email approval

Note: Must attach Form B and Board Agenda Template