

This form should be used to request a move of office, furniture, computer, printer and phone from one location on campus to another location, if needed. After Supervisor Approval, send form to Kimberly Kleinschmidt (krkleinschmidt@lc.edu) Current Location: Request to Move Location: Request to Move Location: Request to Move Location: Request to Move Location: Reducation: Current Date: Relocation Date: Full Time Supervisor Approval: Current Date: Relocation Date: KIMBERLY KLEINSCHMIDT TO SUBMIT THE FOLLOWING: Help Desk ticket request. Help Desk will assign move to desktop technician. Desktop technician will contact requestor to discuss dates and times of move. Maintenance Work Order - Moving of office furniture, file cabinets, boxes, etc. Mail Services Custodial Marketing/PR – LC Directory Change Campus Safety THE REQUESTER WILL SUBMIT MAINTENANCE WORK ORDERS FOR THE FOLLOWING: Office Name Plate Key(s) (Office, Building, Parking Lot Gate Card) CHECKLIST Current Location Staff /Faculty Dept From From Bidg Room Commen	Office/Space Relocation Request									
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Lori Artis

Computer

Printer

Furniture

Phone

Vice President, Administration

Temporary Storage

Chris Paulda

Director, Capital Projects/Campus Operations

Date: _____