FHS024 – Application Form for Minor CAPEX Projects

(<R100 000)

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| Application details | | | | |
| Department and Division/Institute |  | | | |
| Project name (e.g. F56 toilets) |  | | | |
| Applicant name |  | | | |
| Date of Application |  | | | |
| Contact telephone number |  | | | |
| Email |  | | | |
| Primary owner of space (i.e. UCT, DOH, GSH, other) |  | | | |
| Permission granted if UCT is not primary owner (details) |  | | | |
| Physical location of space (i.e. building, level, room number) |  | | | |
| Can or will this space be shared by others |  | Yes |  | No |
| First application for funding (from UCT) |  | Yes |  | No |
| Amount of UCT funding requested |  | | | |
| Amount of co-funding provided (if relevant) |  | | | |
| Signature of HOD\* |  | | | |
| Full name of HOD |  | | | |

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| Rationale for application |
| Please provide a motivation of up to 500 words for funding request. |
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| Additional items | | | | |
| Sketch drawing of new space layout/requirement attached |  | Yes |  | No |
| Budget estimate attached |  | Yes |  | No |
| Quotes attached |  | Yes |  | No |