

## **Capital Request Process**

### **Definitions**

Capital Purchase Request (fixed asset) - Any tangible property valued at \$1,000 or above and with a useful life span of two or more years (e.g., furniture, equipment, technology hardware or software, classroom equipment, laboratory equipment, etc.).

Capital Improvement Project Request - Any renovation or construction projects that create a capital asset with an expected life span of two or more years, and have a total expected value of at least \$1,000 (e.g., Classroom renovation, student support spaces, office relocations/expansions, etc.).

### **Capital Request Prioritization Criteria**

The following criteria will be utilized by Senior Leadership to determine the approval and prioritization of capital requests:

- Alignment with Strategic Plan
- Potential Revenue Generating Source
- Health Safety and Compliance Priority
- Executive Priority
- Office of Management and Budget Priority

### **Procedures and Guidelines**

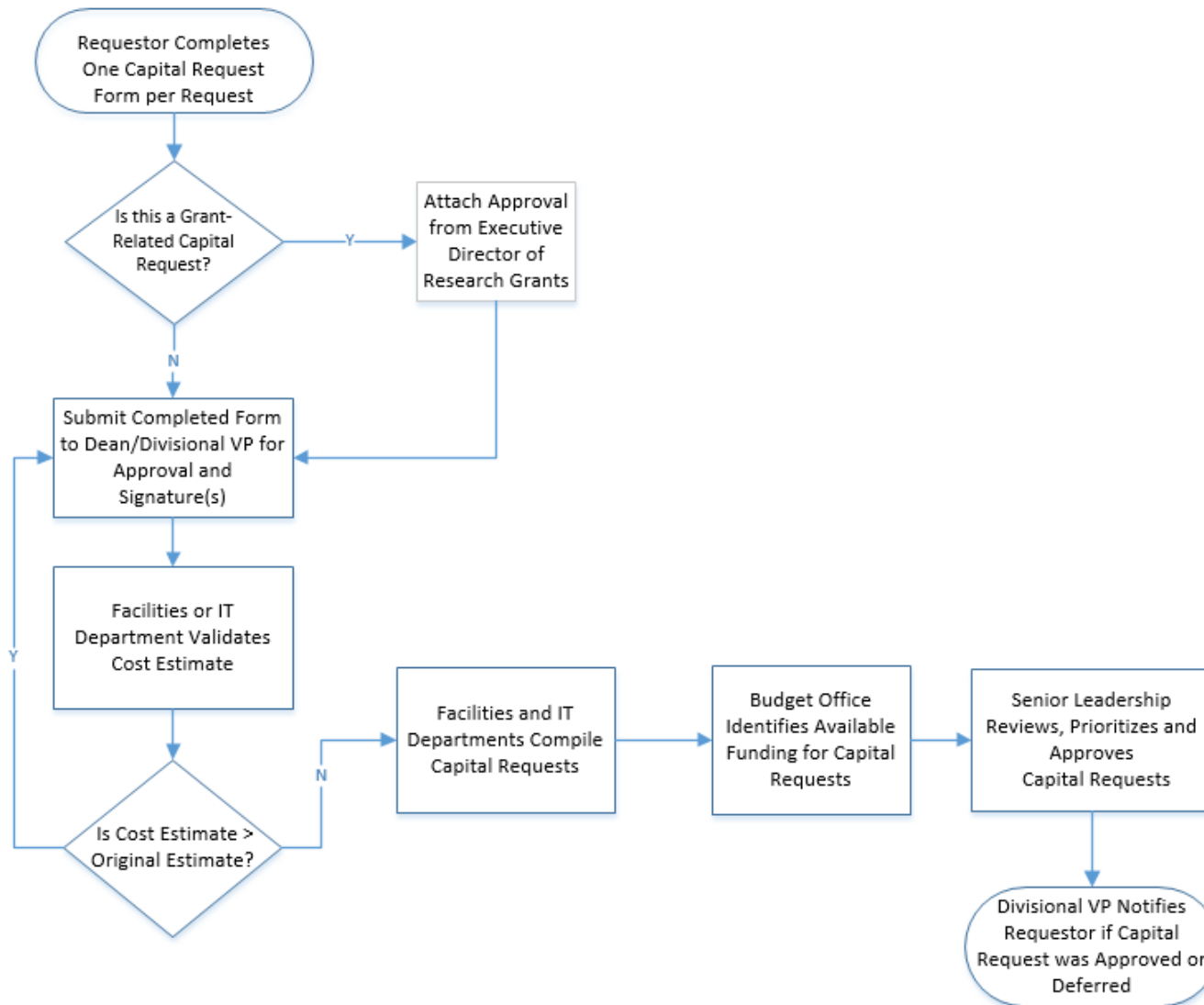
All departments must make every effort to submit capital requests during the annual budget request process. Occasionally, circumstances may occur when it may be necessary to submit a capital request outside of the annual process. This should be infrequent and the exception to the rule.

Capital purchase and project requests should be reviewed with the Department of Facilities and Construction Management (for building-related projects) and/or the Department of Information Technology (for technology purchases or projects) to determine cost estimates.

To submit a capital request, please follow the below procedures and guidelines:

1. If capital request is a grant-related capital request, the Executive Director of Research Grants and Sponsored Programs must review and approve the grant and requested capital items prior to submitting the capital request. The Executive Director will ensure the grant request captures any Facilities/IT related capital expenses, if applicable.
2. Requestor completes one capital request form per request. Requestor submits completed form to Dean/Divisional Vice President for approval and signature(s).
3. The Divisional Vice President reviews and/or approves capital request. If approved, the Divisional Vice President submits form to Facilities or IT department for cost estimate validation.
4. If it is determined that the original cost estimate is in excess of the submitted amount, the form is returned to the Divisional Vice President for review and approval.
5. Facilities and IT compile approved capital requests.
6. The Budget Office prepares the annual budget package and identifies available funding for capital requests.
7. Senior Leadership reviews, prioritizes and approves capital requests based on available capital funding and prioritization criteria.
8. The Divisional Vice President communicates with Requestor if capital request was approved or deferred.

## Capital Request Process Workflow



**New Jersey City University  
Capital Request Form**

Capital Purchase or Project Request Date: \_\_\_\_\_

Requestor Name: \_\_\_\_\_

Department Name: \_\_\_\_\_

Cost Estimate: \_\_\_\_\_

Desired Start Date: \_\_\_\_\_

Desired Completion Date: \_\_\_\_\_

Describe the capital purchase or project scope in detail (include building, floor, and room #, if capital project):

Describe how this capital purchase or project aligns with the University's strategic plan. Reference specific plan goals and objectives of the plan:

Will this capital purchase or project impact the University's operating budget or individual department budget? If so, how?

Does this capital purchase or project present a revenue generating opportunity for the University? If so, how?

Is this capital purchase or project related to a health, safety, and compliance priority? If so, how?

Will this capital purchase or project be funded via a grant, individual department budget or other funding source? Please elaborate.

Chairperson Signature, if applicable: \_\_\_\_\_ Date: \_\_\_\_\_

Dean/Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Vice President Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(Divisional VP supports the initiatives outlined in this request)*

*Note: Forward to Facilities or IT for cost estimate validation.*