



Greenhouse Space Request Form
 Department of Ecology, Evolution, and Organismal Biology
 Iowa State University



(Ideally space requests should be made one semester prior to proposed use to ensure a greater chance of space availability)

If you have any questions about greenhouse space usage, how to fill out this form, or any other greenhouse related inquiries, please contact Kenny McCabe (Greenhouse Manager) at 515-294-8250, email: kmgccabe@iastate.edu or visit me in the greenhouse (Room 504A)

Date: _____
 Project Leader and Cooperator(s): _____
 Campus address: _____
 Title of Proposed Project: _____
 Phone Number: _____ email: _____
 Mission: Research _____ Teaching _____ Ext./Dem. _____
 Estimated Space Requirement: _____ square feet.
 Type: Raised bench _____ Mist bench _____ Other _____
 Preferred location: _____
 Project Initiation: _____ Project Termination: _____ Project duration: _____ wks
 Crops to be grown: _____

<u>Environmental requirements:</u>	<u>Default condition</u>	<u>Special requirement</u>
Minimum temperature	20° C day/night	_____
Supplemental lighting:		_____
Photoperiod	None	_____
Plant productivity	None	_____
Blackout cloth	Only 516, 517A	_____
Shade cloth	None	_____
Shade compound	Summer only	_____
 <u>Cultural requirements:</u>	 <u>Default condition</u>	 <u>Special requirement</u>
Pesticides/Biologicals	As needed	_____
Growth regulators	None	_____

Please provide a brief statement describing the proposed project objective(s), experimental design, any relevant procedures, and a timetable of cultural requirements.

***** Committee Use Only *****

Space Approved: _____ Date Effective: _____

Space Allocated:

Range: _____	Room: _____	Benches: _____	ft ²
Range: _____	Room: _____	Benches: _____	ft ²
Range: _____	Room: _____	Benches: _____	ft ²
Range: _____	Room: _____	Benches: _____	ft ²