Office of the Bronx Borough President
Fiscal Year 2017 Capital Request Form for Education Projects

School Name:

Address:

Principal Name and Telephone Number:

Project Title:

Amount Requested: ***(Please confirm with either SCA or DOE)***

Project Description: *(include approximate square footage of area that will be impacted by the project and whether the project includes any changes in existing utilities/IT cabling, etc…)*

Has this estimate been reviewed and approved by the School Construction Authority or DOE Division of Capital & Reimbursable Finance? Name of contact that confirmed the estimate.
___ Yes ___ No

*If no, please contact the School Construction Authority; Bryan McGinn at (718) 472-8370 or bmcginn@nycsca.org or DOE Division of Capital & Reimbursable Finance; Graham Gordon at (718) 935-4450 or ggordon@schools.nyc.gov to confirm your estimate. This is a MUST.

Has your school been funded by the Office of the Bronx Borough President in the last three fiscal years?
___ Yes ___No

If so, please identify project and fiscal year _____