

FACILITIES MASTER PLAN / CAPITAL PROJECT REQUEST  
CAPITAL REQUIREMENTS SUMMARY AND NEEDS ASSESSMENT FORM  
(Form A)

Institution: Shelton State Community College

Telephone Number: 205.391.2975

Name of Respondent: DeLane Bailey

E-Mail Address: dbailey@sheltonstate.edu

A. IMMEDIATE CAPITAL REQUIREMENTS - YEAR 1 (FY 2016-2017)

	Institutional Priority	Funding Sources			Estimated Total Cost	Specify Source(s) Other State	Specify Source(s) Other Funds	Building Number (If existing Facility or Facilities)	Space Utilization Description (If more than 1 Code used, include % for each Code. Click here to view Codes)	Projected Gross Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Projected Net Assignable Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Space Category (If more than 1 Code used, include % for each Code. Click here to view Codes)	Change in Purpose (Yes or No Depending on Project)	Projected Start/ Acquisition Date (Date reported cannot be before the start of the fiscal year to be reported on the form. Fiscal Years run from Oct. 1 - Sept. 30)	Projected Completion Date	Basis of Requirement (Use no more than 2 Codes. Click here to view Codes) USE LETTER OF CODE ONLY
		Education Trust Fund	Other State Funding	Other Funds												
<b>1. New Construction/Acquisition Projects</b>																
1.	6		\$1,500,000	\$1,500,000		Title III	2,8	2T	5,000	5,000	E & G Health		10/1/2016	9/30/2017	B, D	
2.	2		\$300,000	\$300,000	Unexp Plant		1	8	2,500	2,500	Other		10/1/2016	9/30/2017	F	
3.																
4.																
Subtotal			\$300,000	\$1,500,000	\$1,800,000											
<b>2. Renovation/Remodeling Projects</b>																
1.																
2.																
3.																
4.																
Subtotal																
<b>3. Major Capital Equipment Projects</b>																
1.	1		\$500,000	\$500,000	Unexp Plant		1	9			E & G	No	10/1/2016	9/30/2017	E, G	
2.																
3.																
4.																
Subtotal			\$500,000	\$500,000												
<b>4. Deferred Maintenance/Facilities Renewal (See Instructions)</b>																
1.	3		\$200,000	\$200,000	Unexp Plant		1	9			Other	No	10/1/2016	9/30/2017	E, G	
2.	4		\$250,000	\$250,000	Unexp Plant		1	1, 7	50,000	50,000	E & G	No	10/1/2016	9/30/2017	E	
3.	5		\$500,000	\$500,000	Unexp Plant		1	9	100,000	100,000	E & G	No	10/1/2016	9/30/2017	E	
4.																
Subtotal			\$950,000	\$950,000												
Total Immediate Year 1 Capital Requirements			\$1,750,000	\$1,500,000	\$3,250,000											

**A brief description and justification must be attached for each project listed above. If the descriptions/justifications are listed below adjust the print range so they print out properly**

Provide a succinct but thorough justification of the need for the capital project. This information may be included in a separate Word Processing document. See instructions for further information.

FACILITIES MASTER PLAN / CAPITAL PROJECT REQUEST  
CAPITAL REQUIREMENTS SUMMARY AND NEEDS ASSESSMENT FORM  
(Form B)

Institution: Shelton State Community College  
Name of Respondent: DeLane Bailey

Telephone Number: 205.391.2975  
E-Mail Address: [Dbailey@sheltonstate.edu](mailto:Dbailey@sheltonstate.edu)

B. INTERMEDIATE CAPITAL REQUIREMENTS - YEAR 2 (FY 2017-2018)

	Institutional Priority	Funding Sources			Estimated Total Cost	Specify Source(s) Other State	Specify Source(s) Other Funds	Building Number (If existing Facility or Facilities)	Space Utilization Description (If more than 1 Code used include % for each Code. Click here to view Codes)	Projected Gross Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Projected Net Assignable Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Space Category (If more than 1 Code used include % for each Code. Click here to view Codes)	Change in Purpose (Yes or No Depending on Project)	Projected Start/ Acquisition Date (Date reported cannot be before the start of the fiscal year to be reported on the form. Fiscal Years run from Oct. 1 -Sept. 30)	Projected Completion Date	Basis of Requirement (Use no more than 2 Codes. Click here to view Codes) USE LETTER OF CODE ONLY
		Education Trust Fund	Other State Funding	Other Funds												
<b>1. New Construction/Acquisition Projects</b>																
1	4		\$350,000	\$350,000		Title III		15	10,000		Other		10/1/2017	9/30/2018	L	
2	2	\$1,000,000		\$1,000,000	Unexp Plant		1	1	5,000		Other		10/1/2017	9/30/2018	B	
3	3	\$1,000,000		\$1,000,000	Unexp Plant		1	1	5,000		Other		10/1/2017	9/30/2018	B	
	Subtotal	\$2,000,000	\$350,000	\$2,350,000												
<b>2. Renovation/Remodeling Projects</b>																
1	6	\$500,000		\$500,000	Unexp Plant		1	5	2,500	2,500	Other		10/1/2017	9/30/2018	B	
2	5	\$700,000		\$700,000	Unexp Plant		1	8	5,500	5,500	E & G		10/1/2017	9/30/2018	B	
3																
4																
	Subtotal	\$1,200,000		\$1,200,000												
<b>3. Major Capital Equipment Projects</b>																
1	1	\$500,000		\$500,000	Unexp Plant		1	17			Other		10/1/2017	9/30/2018	F	
2																
3																
4																
	Subtotal	\$500,000		\$500,000												
<b>4. Deferred Maintenance/Facilities Renewal (See Instructions)</b>																
1																
2																
3																
4																
	Subtotal															
Total Intermediate Year 2 Capital Requirements			\$3,700,000	\$350,000	\$4,050,000											

**A brief description and justification must be attached for each project listed above. If the descriptions/justifications are listed below adjust the print range so they print out properly**  
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**FACILITIES MASTER PLAN/CAPITAL PROJECT REQUEST**  
**CAPITAL REQUIREMENTS SUMMARY AND NEED ASSESSMENT FORM**  
**(Form A) FY 2016-2017**  
**Description and Justification**

**Shelton State Community College**  
DeLane Bailey      205.391.2975  
[dbailey@sheltonstate.edu](mailto:dbailey@sheltonstate.edu)

1.1

As a result of increased enrollment in the College's respiratory therapy program, current space and facilities are not sufficient to meet the needs of the program. The College is working with an architect to develop a plan to renovate and expand an existing facility on the C. A. Fredd campus.

1.2

The Martin campus lacks a general space for student organizations. The College is working with an architect to incorporate these needs into its master plan.

3.1

The Martin Campus is eighteen years-old and the existing HVAC equipment needs upgrading. This equipment provides HVAC services for the entire main building on the Martin Campus. The upgrades will include addressing equipment such as boilers, chillers, and control panels. SSCC has secured services of a retro-commissioning contractor to advise the College on utility savings and efficiencies.

4.1

The parking lot at the Martin Campus needs to be resealed in order to maintain an acceptable timeframe of safe usage.

4.2

The Theater Wing at the Martin Campus has longstanding EFIS repair and re-caulking needs that create roofing leaks and will cause premature deterioration of the exterior surfaces.

4.3

The exterior painted portions of the main building at the Martin Campus need to be repainted in order to maintain both the appearance and durability of the structure.

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**(Form B) FY 2017-2018**  
**Description and Justification**

**Shelton State Community College**

DeLane Bailey 205.391.2975

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1.1

Increased enrollment and the expansion of programs dictate the need for additional space on the C. A. Fredd Campus. This project will be an add-on to an existing facility.

1.2

The design of the area dedicated to student services was appropriate eighteen years ago when the College was constructed. This area of the Martin Campus needs remodeling and renovating to meet student needs in an efficient, personal, and confidential manner. The College is working with an architect to incorporate these needs into its master plan.

1.3

The design of the area dedicated to the Cashier's Office was appropriate eighteen years ago when the College was constructed. This area of the Martin Campus needs remodeling and renovating to meet student needs in an efficient, personal, and confidential manner. The College is working with an architect to incorporate these needs into its master plan.

2.1

The College lacks a concession stand and restroom facility for the softball complex. The College is working with an architect to develop a plan for this project.

2.2

In an effort to create a more cohesive advising unit for the Student Services division of the College, the remodeling of an existing space on the Martin Campus is needed. This project will include incorporating Student Career Services in the new design. Currently these offices are located in a remote area of the building not readily accessible to students. Career Services has increased its role in advising students and in guiding them as they select professions for which they have interests and abilities. In addition, this program is giving students the information to learn about opportunities in the technical fields. The College is working with an architect to develop a plan to renovate and expand the existing facility.

3.1

The Martin Campus lacks a comprehensive public address/sound system for the entire main building and surrounding parking lots. This system would allow usage during emergencies and also with public events held at the Martin Campus.