**Program Statement**

Project Name:  *(for new buildings this will establish the “placeholder name”)*

Campus:

Date: *(of BOR meeting where it will be voted on)*

Prepared by: NU Facilities Planning & Construction

*(A/E firm or others who helped)*

Project No:

1. **Introduction**
   1. **Background and history**
   2. **Project description**
   3. **Purpose and objectives**
2. **Justification of the Project** 
   1. **Data that supports the funding request**
   2. **Alternatives considered**

(when applicable)

1. **Location and site considerations** 
   1. **County:**
   2. **Town or campus:**
   3. **Proposed site**

*Image*

* 1. **Statewide building inventory:**

*From Real Estate*

* 1. **Influence of project on existing site conditions**
     1. **Relationship to neighbors and environment**
     2. **Utilities**
     3. **Parking & circulation**

1. **Comprehensive Plan Compliance**
   1. **Compliance with the University of Nebraska Strategic Framework, Campus Roles and Mission and Campus Strategic Plan.**
   2. **Consistency with the agency comprehensive capital facilities plan (year of plan and updates or revisions)**
   3. **Consistency with the current version of the CCPE Project Review Criteria/Statewide Plan**
2. **Analysis of existing facilities**
   1. **Function and purpose of existing programs as they relate to the proposed project**
   2. **Square footage of existing areas**

*Table*

* 1. **Utilization of existing space by facility, room and/or function**

(Whichever is applicable – sentences preferred, use a table only if necessary.

Include existing space in 6.B.1)

* 1. **Physical deficiencies**
  2. **Programmatic deficiencies**
  3. **Replacement cost of existing building**

*Start with FMIR value*

1. **Facility Requirements and the Impact of the Proposed Project**
   1. **Functions and purpose of the proposed program**
      1. **Activity identification and analysis**
      2. **Projected occupancy/use levels**
         * **Personnel projections**
         * **Describe/justify projected enrollments/occupancy**
   2. **Space requirements**
      1. **Square footage by individual areas and/or functions**

(A summary of all assignable and non-assignable spaces in net square feet by space use code)

*Table*

* + 1. **Basis for square footage/planning parameters**
    2. **Square footage difference between existing and proposed areas (net and gross)**

*Simple Table*

* 1. **Impact of the project on existing space**
     1. **Reutilization and function(s)**

*Table or narrative (preferred)*

* + 1. **Demolition**
    2. **Renovation**

1. **EQUIPMENT REQUIREMENTS**
   1. **List of available equipment for reuse**
   2. **Additional Equipment** 
      1. **Fixed equipment**
      2. **Movable equipment**
      3. **Special or technical equipment**

*Keep information in section 8 succinct. These are brief high level summaries that should indicate the intended direction of the project and any primary decisions or assumptions from programming.*

1. **SPECIAL DESIGN CONSIDERATIONS**
   1. **Construction Type**
   2. **Heating and Cooling Systems**
   3. **Electrical Systems**
   4. **Sustainability**
   5. **Life Safety/ADA**
   6. **Security**
   7. **Historic or architectural significance**
   8. **Artwork**

(for applicable projects)

* 1. **Phasing**
  2. **Future expansion**
  3. **Other**

1. **PROJECT BUDGET & FISCAL IMPACT**
   1. **Cost Estimate Criteria**
      1. **Identify recognized standards, comparisons and sources**
      2. **Identify year and month on which estimates are made and inflation factor used**
      3. **Net and gross square feet**

|  |  |
| --- | --- |
| Net Square Feet |  |
| Gross Square Feet |  |

* + 1. **Project cost per net and gross square foot**

|  |  |
| --- | --- |
| Net Square Feet |  |
| Gross Square Feet |  |

* + 1. **Construction cost per gross square foot**
  1. **Total project cost**

*Budget table; include Inhouse services*

* 1. **Fiscal impact based on first full year of operations** 
     1. **Estimated additional operational and maintenance costs per year**

*Table*

* + 1. **Estimated additional programmatic costs per year**

*Table*

1. **FUNDING**
   1. **Total funds required:**
   2. **Project Funding Sources:**

*Table*

* 1. **Fiscal year expenditures**

*Table (fiscal years are designated by the year in which they end)*

1. **TIMELINE** 
   1. **Program Statement**
   2. **Funding**  or Fundraising (if not available at start)
   3. **Professional consultant(s) selection** (or Design/Build selection, Design and Construction Manager selections)
   4. **Intermediate Design**
   5. **Receive bids for construction** (NA for Design/Build)
   6. **Start of construction**
   7. **Complete construction**
   8. **Occupy**
2. **HIGHER EDUCATION SUPPLEMENT**
   1. **Coordinating Commission for Postsecondary Education (CCPE) Review**
      1. CCPE review is required.

(Information is included: State funded and/or O&M threshold met)

* + 1. CCPE review is not required.
  1. **Method of Contracting**
     1. **Identify method**

*Select from: Design-Bid-Build, Design-Build, Construction Manager at Risk (CMR)*

* + 1. **Provide rationale for method selection**

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