

TEXAS A&M UNIVERSITY  
NEW SERVICE DEPARTMENT REQUEST FORM

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

Initiating Department: \_\_\_\_\_

Desired Date For Services to Begin: \_\_\_\_\_

Contact Person	Title	Email	Phone
_____	_____	_____	_____

Please describe the activities to be provided, including goods and/or services (attach a separate sheet if necessary):

Will you be using highly complex or specialized facilities?

Who do you anticipate to be the users of this service department?

What kind of document do you plan to have with your customers regarding services provided? Will you invoice them as services are provided or will there be a standing agreement/contract?

Why can this service best be provided by an internal TAMU department rather than an external service provider?

What expected benefits and potential problems do you anticipate with this service department?

What amount of projected revenues/expenses do you expect the service department to generate on an annual basis? Will the service department be partially subsidized by another TAMU department? Who will cover the shortfalls in a given year if the revenues do not cover all the expenses?