Southeast Fountain School Corporation

Request Room Repair Form

TEACHER ROOMS

The following form has been designed to maintain a current record of all room repair undertaken by Southeast Fountain School Corporation's staff and/or workforce. It shall be the responsibility of the school principal to ensure the following form is completed; and then forwarded to the proper personnel to complete the requested work repair.

FROM: _____ BUILDING: _____
(H.S. or ELEM.)

DATE FORM SUBMITTED: _____ ROOM NUMBER: _____
(M/D/YY)

DESCRIPTION OF ROOM REPAIR:

_____

_____

_____

_____

_____

_____

_____

_____

_____

NOTE: The above must clearly describe the scope of the work requested.

DATE WORK COMPLETED: _____
(M/D/YY)

WORK COMPLETED BY:_____

Notes: