



Maintenance & General Request Form

C O N F I D E N T I A L

Staff/Student Name

Location/Room No/Class

Current Date

Facility Requiring Attention:

Description of the Problem:

Course of Action (Internal/External):

Completion/Satisfaction:

To be COMPLETED out by the Office Administrator:

The maintenance request is:

Approved Not Approved

The request relates to Technological Facilities:

Yes (if so, consult IT Support)

No

Office Administrator

Signature

Date

CEO

Signature

Date