



Lafayette County C-1 School District Maintenance Request Form

Location of Work Needed *(This portion to be completed by the person making the request)*

Building: _____ Room #/Location: _____

Person Making Request: _____ Date of Event/Work: _____

Briefly describe the work to be completed *(please include anything extra that might be needed on site):*

Signature: _____ Date of Request: _____

Priority *(This portion to be completed by the building administrator)*

Emergency (a safety risk to our students/staff/patrons)

Urgent

Building Administrator Signature: _____

Should be done as soon as possible

Date submitted to custodial staff: _____

Can wait until a vacation period

Task submitted to: _____

Comments: _____

Project Completion *(To be completed by custodial / maintenance staff and returned to building Administrator when project has been completed.)*

Return Comments: _____

Date Project: _____ Signature: _____