



# Deneen School of Excellence

## Maintenance Request Form

Teacher's Name: \_\_\_\_\_ Room #: \_\_\_\_\_  
Date of Request: \_\_\_\_\_

ISSUE	DESCRIPTION
Example: Lights	Three lights do not work even after bulbs are replaced.

(Please Print Clearly)

1.	
2.	
3.	
4.	
5.	

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal' Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Custodial Usage Only: Submit a copy of completed request to Ms. Lewis.

Request completed by: \_\_\_\_\_ Date of Completion: \_\_\_\_\_