

HALE COUNTY SCHOOL SYSTEM
MAINTENANCE DEPARTMENT
Work Order Request

Routine Work Request Child Nutrition Program Emergency: Yes No

School _____ Date Requested _____

Check Type of Work Requested (*one category per work order*):

- | | |
|---|---|
| <input type="checkbox"/> Air Conditioning/Refrigeration/Heating | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Carpet/Tile | <input type="checkbox"/> Roof Repair - <input type="checkbox"/> Main Building |
| <input type="checkbox"/> Delivery | - <input type="checkbox"/> Portable Building |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Secure Building |
| <input type="checkbox"/> Glass Repair/Door/Locks | <input type="checkbox"/> Other _____ |

Description of Work Requested and Location _____

Authorized Signature _____

Central Office Use Only

Date Order Received _____

Time: Arrive _____ Leave _____ Signature _____

Time: Arrive _____ Leave _____ Signature _____

Repairs Made By _____

Repairs Completed: Yes Date Completed _____
 No Reason Work Not Completed _____

Total Hours _____ Regular Overtime

Maintenance Employee
White/Canary/Pink Copy - Central Office

Maintenance Supervisor
Goldenrod Copy - School