



Golden Hills School Division No. 75
Maintenance Service Request Form

Facility Name _____ Date _____, 20__

To: Maintenance Fax 403-934-5125 EMERGENCY

Description of repair or maintenance or service requested. Please check box(es) that apply:

- EMERGENCY
- REGULAR MAINTENANCE
- EQUIPMENT REPAIRS
- 48 HOURS
- VANDALISM
- OTHER

Request by (Please Print) _____

Approved by Principal or Associate Principal _____

| FOR MAINTENANCE DEPARTMENT USE ONLY | | | |
|-------------------------------------|--------|--------------------|-------|
| Material Used | P.O. # | Man Hours Utilized | |
| | | Worker | Hours |
| | | | |
| | | | |
| | | | |
| | | | |

Comments: _____

_____ Date Assigned

DEFERRED _____

_____ Date Completed

_____ Signature

PLEASE MAKE A COPY FOR YOUR SCHOOL RECORDS