Work Order / Maintenance Request Form Arlington Classics Academy

SECTION I

Complete Section I of this form and give to your campus principal/supervisor for approval. Employee Submitting Request: ______Date: _____ Location of Needed Work or Repair: Describe the Work or Repair Needed: **SECTION II** To be completed by the Principal/Supervisor: PRIORITY: Immediately ____ Within 2-3 Days ____ Next Week ____ Routine ____ Next Summer ____ Campus Principal/Supervisor Signature : _____ Date: **SECTION III** To be completed by Maintenance Staff: Can the project be completed by ACA Staff? YES ____ NO ____ Estimated hours to complete: _____ Estimated expense to complete: _____ List of materials needed: Signature of Assigned Personnel: ______ Date Completed: _____ Recommendation if not completed: _____ Date Referred Back if Not Completed: _____