



CENTRAL SERVICES / SCHOOL MAINTENANCE DEPARTMENT

Work Request

Work Order No: _____

Date of Request: _____ Requested by: _____ Phone: _____

Department: _____ Dept. No.: _____

Ext.: _____

Describe Services Needed: _____

If more room is needed to describe services, please write on back of work order. _____ Over

OFFICE USE ONLY

Assigned To: _____ Job Code: _____

Location Code: _____

Date Assigned: _____ Date Started: _____

Date Completed: _____

Labor Used: _____ hrs. Materials Used: _____

Cost: \$ _____

Outside Services: _____ Labor: _____

Cost: \$ _____

Materials Used: _____ Cost: _____

Total Cost: \$ _____

Note: Attach all documents; Receipts, Contractor Receipts, etc. before returning to office.