

STAFF USE OF SCHOOL FACILITIES OR PROPERTIES

SCHOOL SPONSORED PROGRAM

START TIME (S) OF PROGRAM

DATE(S) OF PROGRAM

DAY(S) OF WEEK

TIME IN

TIME OUT

GRADE LEVEL(S)

WHERE IT WILL BE HELD

Please list the Rooms/Areas needed, set up directives, and any equipment that needs to be available.

Multiple horizontal lines for listing rooms, areas, and equipment.

(Use reverse side of form if more space is needed)

CONDITIONS FOR USE

- 1. Promptly file accident and/or incident reports as needed.
2. Only the facilities or properties specifically listed in this permit may be used, and the responsible representative will see to it that areas not listed in this request will be off limits. Appropriate conduct must be enforced.
3. The custodian is responsible for the regulation of heat, ventilation, lights and the operation of all facility equipment.
4. Please submit this form to the Principal for further action. The Superintendent's office will provide a copy of the approval. Upon receipt, arrangements may begin.
5. Any assistance you can provide to the custodial staff in restoring the space to its original condition prior to use will be appreciated.

STAFF SIGNATURE

DATE SUBMITTED

PRINCIPAL SIGNATURE

APPROVAL DATE

SUPERINTENDENT SIGNATURE

APPROVAL DATE

Copies to: Requesting Party Custodian(s) Office