



**WARRENSVILLE
HEIGHTS**
City School District

**Warrensville Heights City School District
Maintenance and Grounds Work Request**
ALLOW THREE DAYS FOR COMPLETION

Date: _____ Assigned To: _____

Requested By: _____ Ext. _____ Building: _____

Principal Authorization: _____ Operations Office Approval: _____

Priority (Circle One)

1. Urgent

2. Within 7-10 working days

REQUEST DESCRIPTION: *(Include description of troubleshooting to date, if applicable.)*

Is there a required completion date? Yes No If yes, Date and brief explanation: _____

Office Use Only

DESCRIPTION OF MATERIALS USED

Additional Work Recommended: _____

Actual Labor Hours: _____ Completed By: _____ Date: _____