

KIDDIE PREP SCHOOL



Ministry of Grace Point Church

Repair Form

Date: _____

Requested By: _____

Room in which problem is located: _____

Current Problem:

___ Carpet

___ Faucet(s)

___ Light(s)

___ Cabinets

___ Door Knob

___ Ceiling

___ Soap Dispenser(s)

___ Closet Door

___ Gym

___ Air Conditioning/Heat

___ Outside Area

___ Hall Area

___ OTHER

Explain Current Problem:

Explain Problem Location:

OFFICE
USE ONLY

Reported By: _____

Date: _____

ATTACHED CONFIRMATION
FORM FROM COMPUTER

Date Fixed: _____