

PENN MANOR SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED: March 8, 2013

REVISED:

705-AR-2. HAZARDOUS/UNSAFE CONDITION REPORTING FORM

Employee Making Report: _____

Position: _____ Building: _____

Date of Report: _____ Signature: _____

Location Of Condition

Building: _____

Interior or Exterior: _____

Room or Area: _____

Descriptive Detail: _____

(Attach sketch if necessary)

Identify any circumstance which might have caused this condition: _____

Corrective Action Taken

(To whom reported, work order number, etc.)

Building Administrator/Immediate Supervisor: _____

Work Order Number: _____

Initiator was notified on: (date) _____

Signature: _____ Date: _____

Work Completed: _____

Signature of Employee: _____ Date: _____