San Diego City School

CRAWFORD EDUCATIONAL COMPLEX

Given to:_____

Date:_____

Staff: _____

REQUEST FOR CAMPUS GOODS/SERVICES

School:_____ Date: _____

Requester's Name: _____Room#: _____

Please indicate the type of service you are requesting:

☐ Custodial ☐ Shipping & Receiving ☐ Loan of Equipment ☐ Network Technical Support (Computer Hardware/Software, Printer, Internet, etc..) ☐ Outlook Mail ☐ Student Data Support (Zangle) ☐ Security	☐ Testing Coordination ☐ Transportation (School Buses) ☐ Promethean Board ☐ I21 Interactive Classroom ☐ DVD, TV, Audio, Doc.& LCD Projector ☐ Telephone, Voice Mail ☐ Other

Please describe the Goods/Services you are requesting in detail:

Date Needed:		Time Needed:	

To be completed by Complex Staff

Request Assigned to: _____ Date: _____

Date of Completion: _____

Comments: