



**Building Rental/After-hour Use
Custodial Report**

Complete this form, send in District Mail to: Facilities Scheduling at Auxiliary Services.

Building: _____ Rental Date: _____

Beginning & End Time for Rental: _____

Activity/Name of Rental: _____

Rental Contact: _____

Area Being Rented: _____

Please check all that apply:

- No Problems, Everything was fine.
- Renter stayed past rental time (# of extra hours _____.)
- Excessive mess (# of extra hours required to clean _____.)
- Damage/Vandalism/Theft/Burglary (enter a Work Order on Sprocket.)

Comments:

Report Completed By: _____ Date: _____