

October Monthly Report	
Full Name	Bernie Perez
Name of School	George Washington High School
Today's Date	October 31, 2016
Please check the following tasks completed this month <input checked="" type="checkbox"/> Discussed Preventive Maintenance Monitoring <input checked="" type="checkbox"/> Submitted Work Orders <input checked="" type="checkbox"/> Completed a Walkthrough <input type="checkbox"/> Had a Volunteer Day (Scheduled one but completed work before the scheduled day) <input type="checkbox"/> Met with PTO to Discuss Progress and/or Donations <input type="checkbox"/> Requested a Consult with DEH <input type="checkbox"/> Requested a Health Education Presentation <input type="checkbox"/> Other: _____	
Who did you discuss preventive maintenance monitoring with? (Please select all the apply) <input checked="" type="checkbox"/> Teachers <input checked="" type="checkbox"/> Administrative Staff <input checked="" type="checkbox"/> Maintenance <input type="checkbox"/> Superintendent or his representative <input type="checkbox"/> Other: _____	
Did you complete a walkthrough this month? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what location(s)? F And E WING AREA	
School campus, restrooms and gym	
If yes, what violation(s) were observed and what action have you taken? <div>1. Ventilation:section vii – A205 both AC units not working..munis #45962</div> <div>2. Building:section vi – F-wing roof gutter rusty and loose metal..munis#46431</div> <div>3. Building:section vi – C111 self closing device to replace or repair..munis # 46435</div> <div>4. Ventilation:section vii – E103-JROTC AC units (3) not working well..munis # 46438</div> <div>5. Ventilation:section vii – A207 AC not working, leaking bad..munis# 46447</div> <div>6. Ventilation:section vii – A101,102,103 all AC leaking badly..munis #46429</div> <div>7. Ventilation:secion vii- GYM AC ton (3) not working, hot air...munis#45494</div> <div>8. Lighting:section viii – GYM Lights (6) burnt out lights..munis #46215</div> <div>All submitted in munis for service request. Bare wood are assigned to Staff.</div>	
<div><input type="checkbox"/> Yes</div> <div><input checked="" type="checkbox"/> No</div>	
If yes, please indicate the type of volunteers, date, and description of activities.	
Did you meet/talk with your parent/teacher organization the month about preventive maintenance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, what topic was discussed?	
Did you request a consult with DEH this month? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, please indicate the date of the meeting and topics addressed	
Did you request a health education presentation this month? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, please indicate the date, topic, and name of presenter	