

## October Monthly Report

Full Name Natasha Dela Cruz

Name of School M. U. Lujan Elementary School

Today's Date October 31, 2016

Please check the following tasks completed this month

- ☒ Discussed Preventive Maintenance Monitoring
- ☒ Submitted Work Orders
- ☒ Completed a Walkthrough
- ☐ Had a Volunteer Day
- ☐ Met with PTO to Discuss Progress and/or Donations
- ☐ Requested a Consult with DEH
- ☐ Requested a Health Education Presentation
- ☐ Other: \_\_\_\_\_

Who did you discuss preventive maintenance monitoring with? (Please select all the apply)

- ☐ Teachers
- ☒ Administrative Staff
- ☐ Maintenance
- ☐ Superintendent or his representative
- ☒ Other: School Staff

Did you complete a walkthrough this month?

- ☒ Yes
- ☐ No

If yes, what location(s)?

**Entire school building**

If yes, what violation(s) were observed and what action have you taken?

**5.2.4, 6.1.2, 6.2.1, 6.3.1, 6.4.3, 6.5.1, 6.7.2, 6.7.3, 11.2,11.4, 13.11, 13.12**

**Corrective action was taken to address identified issues with school staff and MTO staff to include owner. Issues needing to be addressed by F&M have been inputted into Munis**

Did you have a volunteer day this month?

- ☐ Yes
- ☒ No

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?

- ☐ Yes
- ☒ No

If yes, what topic was discussed?

Did you request a consult with DEH this month?

- ☐ Yes
- ☒ 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