



BUILDING/CUSTODIAL INSPECTION REPORT

The purpose of this form is for use as a tool for voluntary use by Principals and Building Custodians to evaluate the cleanliness and maintenance of their respective buildings.

Building/School: _____ Time: _____ Date: _____

Location: _____ Room #: _____

Specific Area Location: _____

Check (✓) column of applicable condition:

| Condition: | Above Average | Satisfactory | Below Average | Remarks* |
|----------------------|---------------|--------------|---------------|----------|
| Exterior | | | | |
| Entrance | | | | |
| Offices | | | | |
| Classrooms | | | | |
| Halls and corridor | | | | |
| Walls | | | | |
| Ceilings | | | | |
| Lighting | | | | |
| Air & Heating Vents | | | | |
| Rest Rooms | | | | |
| Windows | | | | |
| Gym and locker rooms | | | | |
| Other Areas: | | | | |
| | | | | |
| | | | | |

Comments: _____

Inspection report completed by: _____

*Inspection findings should be reported to the responsible Individual/Department to insure appropriate corrections are initiated/completed (i.e. work order, corrective action, etc.).