NEISD TEAM MAINTENANCE

This letter is to let us know how the Maintenance Department was/is working at your location. Please take some time to answer the following questions concerning the work that was done at your location.

Please print fill out and send by pony to the Maintenance Department Quality Control.

Work Order # __________________ Date ________________

Physical location of work (Room #) ______________________________

Technicians name if known ________________________________

Status of work: Please circle appropriate comments.

Complete to my satisfaction: _______________________________________

Needs improvement: ____________________________________________

Response time was:     Quick     Reasonable     Seamed Long     Took Forever

Quality of work:     Showed Pride     Good     Lacks Attention to Detail     Needs Redone

Job Site condition after work:     Clean     Showed effort to clean     Nothing done to clean

Your personal comments here:
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

My name is: ________________________ Please call me at: ________________________

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