

Facilities & Operations Department

Oak Park School District, 13900 Granzon, Oak Park, MI 48237



Personal Appliance Request

As you are aware, personal appliances are not allowed in the District. We understand that some circumstances exist which render these appliances necessary. If you have a circumstance, such as a medical need for you or a student, and need an appliance in your classroom or area, please fill out this form and have it signed by your building administrator. The form will then be forwarded to the Director of Operations for final approval and record keeping.

Unless otherwise noted, the approval is valid only for the school year in which it was approved.

Name: _____
Building/Room: _____
Email address: _____

Appliance Information (Please fill in as much information as possible)

Type of Appliance: _____
Approximate age of Appliance: _____
Make/Model: _____

Please describe below the reason(s) you need this appliance

Requested Time Frame

Beginning Date: _____ Ending Date: _____

Staff Signature: _____ Date: _____

Building Administrator: _____ Date: _____

This section to be completed by the Operations Department

This request has been _____ Approved _____ Denied for the _____ school year.

Director of Operations: _____ Date: _____

Superintendent: _____ Date: _____