



Tracy Unified School District

FACILITY USE ROOM CHECK-IN

Before Use Checklist

By signing this form, the Renter is aware of emergency exit and fire extinguisher locations. Food and drinks are prohibited in West High, Tracy High, Kimball High main and sub-gymnasiums and McKinley Elementary café with wood flooring. Assigned Custodian provides renter with approved requested equipment. Custodian does not set-up or tear down for Renters. Renter puts chairs back on rack, all trash in garbage bins and wipes up spills. Renter is prohibited to staple, pin or hammer nails into any TUSD property walls, equipment or structures. Renter is responsible for supervising everyone in their organization including spectators and children.

Site: _____ **Date:** _____ **Open Time:** _____

Organization Name: _____

√ **District Custodian Opening Facility (Print Name):** _____

√ **Signature of Organization:** _____

√ **Print Name:** _____

Checklist for condition of each area before use:

Clean	No Damage	Area	Exceptions Noted:
<input type="checkbox"/>	<input type="checkbox"/>	Cafeteria	
<input type="checkbox"/>	<input type="checkbox"/>	Multi-Purpose Room	
<input type="checkbox"/>	<input type="checkbox"/>	Main Gym	
<input type="checkbox"/>	<input type="checkbox"/>	Sub-Gym	
<input type="checkbox"/>	<input type="checkbox"/>	Locker Room (Millennium High only)	
<input type="checkbox"/>	<input type="checkbox"/>	Classroom Number _____	
<input type="checkbox"/>	<input type="checkbox"/>	Fields	
<input type="checkbox"/>	<input type="checkbox"/>	Rest Rooms	
<input type="checkbox"/>	<input type="checkbox"/>	Parking Lot	
<input type="checkbox"/>	<input type="checkbox"/>	Other	
<input type="checkbox"/>	<input type="checkbox"/>	Other	

*Kitchens should never be opened for any reason without a Food Service Worker present
High School Lockers are not available to Renters with the exception of Millennium High School*

Check condition of approved equipment before use:

Clean	No Damage	List Approved Equipment	Exceptions Noted:
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

Custodian and Renter describe all check-in issues:



Tracy Unified School District
FACILITY USE ROOM CHECK-OUT
 After Use Cleaning Checklist

Site: _____ **Date:** _____ **Close Time:** _____

Organization Name: _____

Checklist for condition of each area after use:

Clean	No Damage	Area	Exceptions Noted:
<input type="checkbox"/>	<input type="checkbox"/>	Cafeteria	
<input type="checkbox"/>	<input type="checkbox"/>	Multi-Purpose Room	
<input type="checkbox"/>	<input type="checkbox"/>	Main Gym	
<input type="checkbox"/>	<input type="checkbox"/>	Sub-Gym	
<input type="checkbox"/>	<input type="checkbox"/>	Locker Room (Millennium High only)	
<input type="checkbox"/>	<input type="checkbox"/>	Classroom Number _____	
<input type="checkbox"/>	<input type="checkbox"/>	Fields	
<input type="checkbox"/>	<input type="checkbox"/>	Rest Rooms	
<input type="checkbox"/>	<input type="checkbox"/>	Parking Lot	
<input type="checkbox"/>	<input type="checkbox"/>	Other	
<input type="checkbox"/>	<input type="checkbox"/>	Other	

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<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

Custodian and Renter describe Check-Out issues:

√ **District Custodian Opening Facility (Print Name):** _____

√ **Signature of Organization:** _____

√ **Organization Print Name:** _____

*If renter did not perform required clean-up and additional time is required to complete clean and close,
 you will need to obtain authorization from one of the following employees:*

MOT Coordinators: 321-6229 or 321-3925; KHS Maintenance Supervisor: 321-6205,

THS Maintenance Supervisor: 321-0349, WHS Maintenance Supervisor: 321-6215 or

Director of MOT/Facility Use: 321-3708 or Other: 321-0984

For Facility Use Questions or Conflicts contact Facility Use Coordinator: 830-3297