



Cape Henlopen School District

Manual Submissions - Indoor Air Quality Complaint Form

This form must be completed by the complainant and submitted to the Supervisor of Facilities, Cheyenne Rivera. ALL fields are required for processes. Please print legibly.

To maintain HIPPA compliance, any medical condition or protected information must be documented and coordinated through the Human Resources Department, Supervisor of Human Resources, Ned Gladfelter.

Date Submitted: _____

First Name: _____ Last Name: _____

Address 1: _____ Address 2: _____

City: _____ State: _____ Zip Code: _____

Preferred Phone Number: _____ Email: _____

Location of Concern

Building: _____ Room Name/Number: _____

Location Within the Room: _____

Description of Concern

This form should be used if your complaint may be related to indoor air quality with a Cape Henlopen School District facility. Indoor air quality problems include concerns with temperature control, ventilation, and air pollutants. Your observations can help to resolve the problem as quickly as possible. Please use the space below to describe the nature of the complaint and any potential causes.

OFFICE USE ONLY

Received By: _____ Date Received: _____

Status/Reply: _____