

MONTGOMERY COUNTY PUBLIC SCHOOLS**Relocatable Classroom Request**

Office of Facilities Management
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 45 West Gude Drive, Suite 4000, Rockville, Maryland 20850

School Name _____ Date ____/____/____

Please explain why you are requesting relocatable classrooms for the next school year.

If you are requesting additional relocatable classrooms, what activity do you plan to put in the relocatable classroom(s)?

How will you accommodate this need if you do not receive the relocatable classrooms requested?

Do you have any concerns about the condition of existing relocatable classrooms? Please elaborate.

Number of relocatable classrooms being requested:	_____	+ _____	- _____	= _____
	# Presently on-site	# To be added	# To be removed if any	Total relocatables

DUE: Please return fully completed form to the Office of Facilities Management, 45 West Gude Drive, Suite 4000, Rockville, Maryland 20850.