

IEQ Concern Form School Facilities IEQ Coordinator

<u>Instructions</u> : Complete this form if you believe that you have environmental quality of a HCPSS building or facility. The fe HCPSS IEQ Coordinator. You will be contacted within 5 wo	orm is to be submitted to the	rn.
Name of person completing the form: Laura Duggan	_ Date of this request: 12-8-16	_
Student x Staff Parent Visitor	_	
Contact information: Phone: 410-880-5890 Email: laur	a_duggan@hcpss.org	
School Building/Facility: Hammond Elementary Location (sp	ecific room or area) Media	
Briefly describe the concern or problem. Have you attached a	a photo? <u>no</u> Date of photo:	
Suspicious circular growth on ceiling by desk in media When did you notice the problem: 12-8-16		
Action taken by HCPSS:		•
Name / Signature of the HCPSS person responding:		_