Name _____ Grade _____Room # _____

Please complete the following, and turn in before leaving for the summer.

Grade(s) and Subject (s) Taught _____

Are you

Summer Address and Phone #_____

Inventory of room:

_____ # of students desks
_____ # of students chairs
# of school file cabinets in room:
_____ 5 drawer
_____ 4 drawer
_____ 2 drawer
_____ # and type of student cubbies
_____ # and type of student coat racks
_____ #TV(s)
_____ #AV cart(s)
_____ # digital projector(s)

_____ # of folding tables
_____ # of non-folding tables
_____ # of teacher desks
_____ # of teacher chairs
_____ # of school storage cabinets
_____ # of freestanding bookshelves
_____ # and size of whiteboards or chalkboards
_____ # overhead projector(s)
_____ #VHS(s) players
_____ #DVD(s) players

Number and description of any other furniture, equipment, or fixture:

_____

_____

_____

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