

PLAYGROUND/ATHLETIC EQUIPMENT INSPECTION

DUE MONTHLY

SCHOOL NAME: _____ DATE: _____

CHECK THE APPROPRIATE BOX FOR CONDITION OF EQUIPMENT

	N/A = NOT APPLICABLE	EXCELLENT	GOOD	FAIR	NEEDS REPAIR
SWINGS					
SLIDING BOARD					
JUNGLE GYM					
CHINNING BAR					
ARCH/DOME CLIMBERS					
FITNESS COURSE					
CLIMBING WALL					
PLAYGROUND SYSTEMS					
CRAWL 2					
CLIMBERS					
SLIDES					
CAT WALKS					
SLIDING POLES					
VERTICAL LADDERS/ STEPS					
HORIZONTAL LADDERS/RINGS					
FALL PROTECTION MATERIAL					
GYM BLEACHERS					
OUTSIDE BLEACHERS					
TENNIS COURTS					
BASKETBALL GOALS					
OTHER EQUIPMENT					

COMMENTS : _____

***SEND A WORK ORDER FOR THE NECESSARY REPAIRS TO THE MAINTENANCE DEPARTMENT**

****PLEASE BE SPECIFIC AS TO THE NEEDS**

INSPECTED BY: _____