



IEQ Concern Form

School Facilities
IEQ Coordinator

Instructions: Complete this form if you believe that you have a concern about the indoor environmental quality of a HCPSS building or facility. The form is to be submitted to the HCPSS IEQ Coordinator. You will be contacted within 5 working days regarding your concern.

Name of person completing the form: _____ Date of this request: _____

Student Staff Parent Visitor

Contact information: Phone: _____ Email: _____

School Building/Facility: _____ Location (specific room or area) _____

When did you notice the problem: _____

Briefly describe the concern or problem. Have you attached a photo? Date of photo: _____