** ST. POLYCARP CHURCH**

**HALL/KITCHEN CHECKLIST**

 **To be completed when using Mother Drexel Hall/Kitchen.**

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| --- |
| DATE OF EVENT: |
| ORGANIZATION/MINISTRY: |
| PERSON IN CHARGE: |

 **Check List Before Leaving Condition of Kitchen/Hall**

|  |  |  |
| --- | --- | --- |
| Please complete before and after use of kitchen/hall.Indicate “ A black check mark on a white background  Description automatically generated “ if satisfactory or “U” if unsatisfactory. All Boxes should be marked. | **Before Use** | **Before Leaving** |
| Kitchen counters and sink cleaned |  |  |
| Gas turned off |  |  |
| Tables cleaned |  |  |
| Floor spot swept/mopped |  |  |
| Windows/blinds closed |  |  |
| Air/heat turned off |  |  |
| Trash taken to dumpster\*If it is a small function, please use only one trash can. |  |  |
| Hall set-up returned |  |  |
| Food in refrigerator taken or marked with date and name of group. |  |  |
| Lights off |  |  |
| Doors locked |  |  |
|  |  |  |
| **Please complete all of the above tasks. Another group may be using the hall after you!** |  |  |
| \*All hall doors must be unlocked during an event, meeting, etc., in accordance with Fire Regulations. |  |  |

**To be completed by the Office Staff**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time Observed: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_**

**Submitted by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forwarded To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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