



REPUBLIC OF PALAU
MINISTRY OF EDUCATION
BUREAU OF EDUCATION ADMINISTRATION

JOB ORDER FORM

Requesting Office (Choose One):

<input type="checkbox"/> Bureau of Education Administration <input type="checkbox"/> Bureau of Curriculum and Instruction <input type="checkbox"/> Division of Personnel Management <input type="checkbox"/> Division of Research and Evaluation <input type="checkbox"/> Division of School. Management <input type="checkbox"/> Division of Curriculum and Instructional Materials Development <input type="checkbox"/> Division of Instructional Implementation and Teacher Training <input type="checkbox"/> School: _____ <input type="checkbox"/> Others: _____	<input type="checkbox"/> Food Service Program <input type="checkbox"/> Office of the Minister <input type="checkbox"/> Public Library <input type="checkbox"/> Special Education Program <input type="checkbox"/> Adult Education Program <input type="checkbox"/> Administrative Services <input type="checkbox"/> Career Technical Education
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Type of Work Needed:

<input type="checkbox"/> Air Condition Repair <input type="checkbox"/> Electrical Work <input type="checkbox"/> Plumbing Work <input type="checkbox"/> Painting Work <input type="checkbox"/> Sewer Work <input type="checkbox"/> Others _____	<input type="checkbox"/> Copier Machine Repair <input type="checkbox"/> Computer Work <input type="checkbox"/> Technology Work <input type="checkbox"/> Printer Repair <input type="checkbox"/> Internet Repair	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">Equipment Rental</th> <th colspan="2" style="text-align: center;">Vehicle Repair</th> </tr> </thead> <tbody> <tr> <td style="width: 25%;">Type</td> <td style="width: 25%;">Qty</td> <td style="width: 25%;">Plate #</td> <td style="width: 25%;"></td> </tr> <tr> <td>Date Needed</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Date Received</td> <td></td> <td></td> <td>Bus Repair</td> </tr> <tr> <td>Date Returned</td> <td></td> <td>Plate #</td> <td></td> </tr> <tr> <td>Condition</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Equipment Rental		Vehicle Repair		Type	Qty	Plate #		Date Needed				Date Received			Bus Repair	Date Returned		Plate #		Condition			
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Date Returned		Plate #																								
Condition																										

Justification:

Requested By (Print and Sign): _____ Date: _____

Division Level Approval: _____ Date: _____

Bureau Level Approval: _____ Date: _____

MOE SERVICES USE ONLY

Activity	Date Worked	Man Hrs.	Budget Rate	Labor Cost	Material Receipt No.	Material Cost	Total Cost
Prepared By _____						Date: _____	