



Annapolis Valley Regional School Board

Working Together for Students

Application for Appliance in Schools

This form is to be completed by the school administrator or site supervisor and submitted to the Director of Operations. Approval must be received prior to the appliance being used.

School _____
Room/Location _____

Applying for the use of a personal appliance in the workplace.

Applying for the use of a Board appliance in an alternate location.

Type of Appliance _____
Size/Model _____

Accommodation request. Rationale: _____

Program request. Rationale: _____

Is there adequate power in the proposed location? Yes No

Can the appliance be directly connected to the electrical receptacle without the use of a power bar or extension cord? Yes No

Recommended by Principal/Supervisor _____
Signature *Date*

Approved by Director of Operations _____
Signature *Date*

**DIRECTOR OF
OPERATIONS**

121 Orchard Street
PO Box 340
Berwick NS
Canada B0P 1E0

Toll Free 1.800.850.3887
Phone 902.538.4639
Fax 902.538.4741
www.avrsb.ca