

**MONTACHUSETT REGIONAL VOCATIONAL TECHNICAL SCHOOL**  
**Job-Project Application**  
**Automotive/Auto Body/HVAC & Property Maint.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Your School Department (If Applicable) \_\_\_\_\_

Representing What Organization \_\_\_\_\_

Is this Organization            Non Profit \_\_\_\_\_ For Profit \_\_\_\_\_

City or Town Where Organization is Located \_\_\_\_\_

Cities & Towns This Organization Serves \_\_\_\_\_

Vehicle Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Registration#: \_\_\_\_\_ Mileage: \_\_\_\_\_

Brief Description of (Job – Project): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**MONTY TECH IS NOT AND WILL NOT BE RESPONSIBLE FOR ANY LOSS OR DAMAGE WHETHER CAUSED BY US OR NOT, TO ANY VEHICLE OR ARTICLES LEFT IN SAID VEHICLE WHILE IN OUR CARE, CUSTODY OR CONTROL.**

I hereby authorize the above to be done along with the necessary material, and hereby grant students and/or instructors permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. I agree to pay invoice **in full** when vehicle is picked up.

\*Please note: Vehicles must be picked up by 3 pm on the date agreed upon with the Teacher.

\*Vehicle must be less than 10 years old and must be registered and insured. Projects will be on a first come, first serve basis, but may be taken out of order if they are determined to be better suited to students' learning needs at the time. Please remember that this is a school, where learning is our primary mission. We are not a private business. We reserve the right to refuse or cancel any request that does not further our school's educational mission or conflicts with our school's philosophy.

**Owners Signature**

**Date:**

Dept. Approval:            Yes \_\_\_\_\_ No \_\_\_\_\_ Job Assigned \_\_\_\_\_

Cost: \_\_\_\_\_            Date Completed: \_\_\_\_\_            Work Order #: \_\_\_\_\_

Vocational Director Approval \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_