

CLASSROOM INVENTORY

Annual Supply & Furniture Audit

Academic Year: 20____ / 20____

TEACHER NAME

ROOM NUMBER

AUDIT DATE

ITEM DESCRIPTION	INITIAL QTY	CURRENT QTY	CONDITION	NOTES / ACTIONS NEEDED
FURNITURE & FIXTURES				
Student Desks/Chairs				
Teacher Desk & Chair				
Bookshelves				
File Cabinets				
TECHNOLOGY & ELECTRONICS				
Computers / Laptops				
Tablets				
Projector / Smartboard				

ITEM DESCRIPTION	INITIAL QTY	CURRENT QTY	CONDITION	NOTES / ACTIONS NEEDED
GENERAL SUPPLIES				

Textbooks (Set)

Whiteboard Kits

Stationery Bulk

Art Supplies Box

TEACHER SIGNATURE
ADMINISTRATOR APPROVAL