Washroom Cleaning Record

Business / Organization: _____ **Location / Washroom ID:** _____

Month: _____ **Year:** _____

Use this sheet to record washroom cleanings. Fill in the **date** and **time** of each cleaning and the cleaner's **initials**.

Daily cleanings (Entries 1–4)

Day	Time 1	Init 1	Time 2	Init 2	Time 3	Init 3	Time 4	Init 4	Notes / Issues
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									

Day	Time 1	Init 1	Time 2	Init 2	Time 3	Init 3	Time 4	Init 4	Notes / Issues
26									
27									
28									
29									
30									
31									

Daily cleanings (Entries 5–8)

Day	Time 5	Init 5	Time 6	Init 6	Time 7	Init 7	Time 8	Init 8	Notes / Issues
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30									
31									

Tip: If you clean more than 8 times/day, attach an additional copy for overflow entries.