Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

Cell Phone #: Click or tap here to enter text.

 [ ]  Use provided cell phone number for paging.

 [ ]  Please provide me with a pager.

It is the responsibility of the learner to ensure that the pager is returned in the same condition in which it was received. In the event that the pager is lost or willfully damaged, the learner will be responsible for the cost of replacement or repair. When learners are out of town on placement, pagers will either be deactivated or will need to be returned to Medical & Academic Affairs for electives to use in your absence.

I confirm I have received a pager in working order and agree to the above terms.

Signature: Click or tap here to enter text.

For Office Use

Pager #: Click or tap here to enter text.

Cap Code: Click or tap here to enter text.

Activation Date: Click or tap here to enter text.

Date Signed Out: Click or tap here to enter text.