



THE UNIVERSITY
of TEXAS

MEDICAL SCHOOL
AT HOUSTON

*A part of The University of Texas
Health Science Center at Houston*

Clinical Fellow Pager Assignment Sheet

Instructions: Complete this form fully and send a copy to the Memorial Hermann Hospital Telecommunications Office. This office is located on the 1st floor of Robertson, behind the cafeteria and by the gray elevators. Keep the original in your files.

Beeper #: _____ Fellow's Name: _____

Brand: Bravo 800 / Bravo 802 Department: _____

Programming Code: _____ Serial #: _____

Issue Date: _____ Office Phone: _____

Home Phone: _____

Answering Service: _____

Mobile Phone: _____

Pager Issued by: _____

Remarks: _____

I have received one (1) alpha page unit. I accept full responsibility for properly using this equipment and for returning this equipment to the fellowship or GME office when requested. If this page unit is lost, stolen or damaged, I agree to pay the replacement cost of \$200.00.

Signature: _____ Date: _____