

# Workstation Change Form

University of Wisconsin Department of Family Medicine  
Eau Claire/Augusta

Approved by Edu Comm: 4/19/12

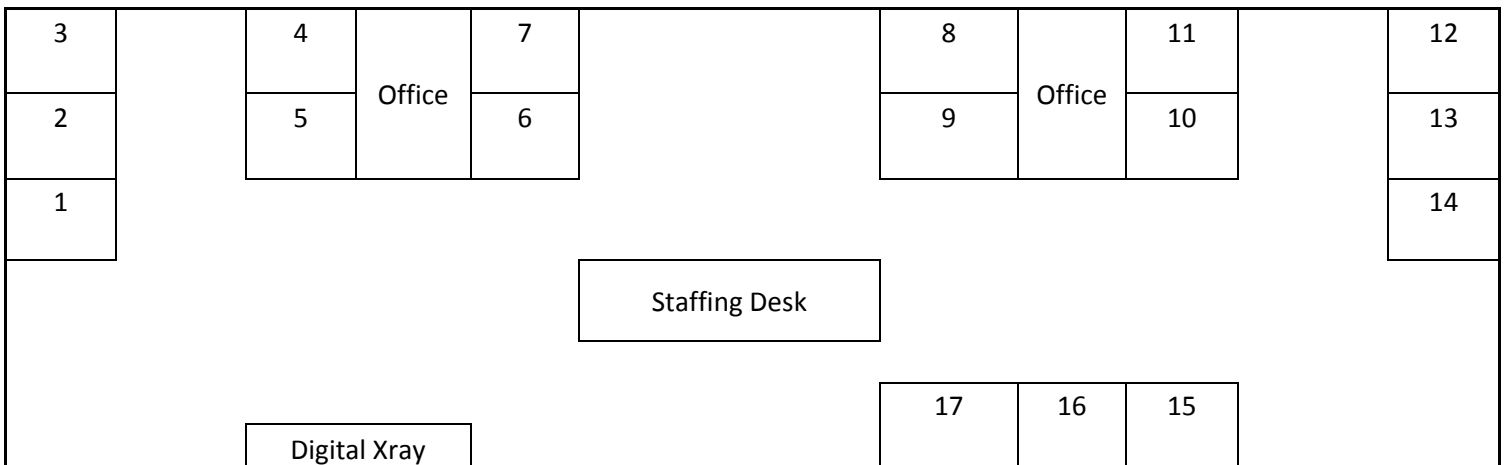
Revised:

**Instructions:** Please complete this form to request a workstation change. Changes will be available when new workstations become available.

Name: \_\_\_\_\_  
Year: PGY1      PGY2      PGY3

Today's Date: \_\_\_\_\_

1. Your current workstation #: \_\_\_\_\_
2. Requesting workstation #: \_\_\_\_\_
  - a. If more than one resident wants the same workstation, priority will be given to PGY status.
  - b. The residents at stations 15-17 will be given first priority to change when a workstation becomes available.



**Approval:**

Approved.                                      Not Approved \_\_\_\_\_  
(explanation)

1. Your Workstation # will be: \_\_\_\_\_
2. Please place your business card to the front of the new workstation.

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Education Coordinator Signature

\_\_\_\_\_  
Date

**For office use:**

- Update Library Layout document
- Contact IT to have phone and computer moved

Original: Resident File (place your business card to the front of the new workstation)

CC: Resident  
IT Staff (for updating phone and computer)