

## SCRUB SUIT ACCESS DEPOSIT FORM

- Badge is required for the scrub bank access set up
- Bring completed form to Cafeteria's Cashier at 1st floor, main building), Mon-Fri - 7:30-10:30 /13:30-15:30
- \$50.00 Deposit (via Credit/ Debit only ) for TWO sets of scrub suits ( two tops and two bottoms)
- Scan and email form to [meded@stjoestoronto.ca](mailto:meded@stjoestoronto.ca) OR hand it to Student Centre, 1S-111, to be set up to the Scrub Bank Machine
- **Retain this form and receipt for a refund at the end of your rotation**

<b>First Name:</b>	<b>Last Name:</b>	<b>Date:</b>
<b>SJHC Badge Number*:</b>	<b>Phone Number:</b>	

Occupation: (Please select one from the below)	Scrub Suit <u>Top</u> Size	Scrub Suit <u>Bottom</u> Size
<input type="checkbox"/> Clinical Fellow	<input type="checkbox"/> 2X-Small	<input type="checkbox"/> 2X-Small
<input type="checkbox"/> Medical Fellow	<input type="checkbox"/> X-Small	<input type="checkbox"/> X-Small
<input type="checkbox"/> Student	<input type="checkbox"/> Small	<input type="checkbox"/> Small
<input type="checkbox"/> Resident	<input type="checkbox"/> Medium	<input type="checkbox"/> Medium
<input type="checkbox"/> Vendor (Specify):	<input type="checkbox"/> Large	<input type="checkbox"/> Large
<input type="checkbox"/> Observer	<input type="checkbox"/> X-Large	<input type="checkbox"/> X-Large
<input type="checkbox"/> Other (Specify):	<input type="checkbox"/> 2X-Large	<input type="checkbox"/> 2X-Large

<i>Payment Processing</i>			
I Authorize St. Joseph's Health Center to		To be filled in by Cafeteria	
<input type="checkbox"/>	Visa	<b>Deposit amount:</b>	\$50.00
<input type="checkbox"/>	Master Card	<b>Date of Payment:</b>	
<input type="checkbox"/>	American Express	<b>Payment Processed by:</b>	
<input type="checkbox"/>	Debit Card	<b>Clerk Signature:</b>	
Debit/Credit Card Holder: (Print Name Below)			
Authorized Signature: (Sign Below)			

When emailing this form to us, please staple your RECEIPT here.  
 (make sure no form details are blocked)

## SCRUB SUITS ACCESS REFUND FORM

- Return all your scrubs to scrub machine to obtain full refund
- Scan and email this this form (front & back) to [meded@stjoestoronto.ca](mailto:meded@stjoestoronto.ca)
- Education Coordinator at Student Centre will validate your scrub record on the form

Scrub Suit Return (filled out by Supervisor/Unit Clerk)	
1) Expected Scrub Suit Balance	2 Scrub Suits (4 pieces)
2) Final Scrub Suit Balance (filled out by supervisor/unit clerk):	
3) Scrub Suit not returned (filled out by supervisor/unit clerk):	
Supervisor/Unit Clerk Name:	
Supervisor/Unit Clerk Signature:	
Date Returned:	Total Refund:

- Present the validated form to Cafeteria's Cashier to retrieve deposit at the end of your term
- Have your original method of payment ready

To be filled in by Cafeteria	
Date of Refund:	
Refund Processed By:	
Clerk Signature:	