

## External Collector: Change to Information

<b>A. Specimen Collector Information</b>	
<b>Active agreement with Eastern Health in place?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name of Organization</b>	<As on original agreement >
<b>Name of Business Owner</b>	<As on original agreement >
<b>Email address</b>	

### Complete ONLY sections that have changed

<b>B. Specimen Collector Location/Staffing</b>					
<b>Location (name)</b>	<e.g. clinic name, home collections>				
<b>Address</b>					
<b>Location contact</b>	<b>Name:</b>				
	<b>Telephone number:</b>		<b>Cell number:</b>		
	<b>Email</b>				
<b>Days of collection</b>	<Indicate days of collection (no expansion to that defined in Collectors Agreement)>				
<b>Hours of collection</b>	<Indicate hours of collection (no expansion to that defined in Collectors Agreement)>				
<b>Drop off location (Select all that apply)</b>	<b>St. John's:</b>	<b>Rural Avalon</b>	<b>Peninsula's</b>		
	<input type="checkbox"/> Health Sciences Centre	<input type="checkbox"/> Carbonear <input type="checkbox"/> Bell Island <input type="checkbox"/> Old Perlican <input type="checkbox"/> Placentia <input type="checkbox"/> Whitbourne	<input type="checkbox"/> Clarenville <input type="checkbox"/> Bonavista <input type="checkbox"/> Burin <input type="checkbox"/> Grand Bank <input type="checkbox"/> St. Lawrence		
<b>Staff assigned to specimen collection and packaging for transport</b>					
<b>Staff name as previously submitted</b>	<b>Remove</b>	<b>Add</b>	<b>Name Change</b>	<b>Other (describe)</b>	
<b>Couriers/Individuals who will transport specimens</b>				<b>Remove</b>	<b>New</b>
<b>Submitted By (Specimen Collector):</b>			<b>Approved By (Eastern Health):</b>		
Name:			Name:		
Title:			Title:		
Signature:			Signature:		
Date: DD/MONTH/YYYY			Date: DD/MONTH/YYYY		

Attach and email to: [Collector.Applications@easternhealth.ca](mailto:Collector.Applications@easternhealth.ca) Help? Contact [EHLabcollections@easternhealth.ca](mailto:EHLabcollections@easternhealth.ca)