College of Allied Health Oklahoma City Student Locker Request

Student Name:

Student ID#:

Do you currently have a locker checked out/sharing with another student? Yes No

If you are currently sharing a locker with another student, list which locker number you are sharing, and we will issue you your own separate locker so that you do not have to share with anyone:

Student Program (select your program):

Doctor of Audiology

BS Communication Sciences & Disorders

MA in Speech-Language Pathology

BS Medical Imaging & Radiation Sciences – Nuclear Medicine

BS Medical Imaging & Radiation Sciences – Radiation Therapy

BS Medical Imaging & Radiation Sciences - Radiography

BS Medical Imaging & Radiation Sciences - Sonography

MA in Dietetics and/or MS in Nutritional Sciences

Doctor of Philosophy (Nutritional Sciences)

Master of Occupational Therapy

Doctor of Physical Therapy

Doctor of Science in Rehabilitation Sciences

Doctor of Philosophy (Rehabilitation Sciences)

- 1. Save this form to your computer.
- 2. Attach the saved form from your computer to an email message via your HSC email and send to the Office of Academic & Student Services at alliedhealth-info@ouhsc.edu. We will notify you through your HSC email within 48 hours (M-F, 8:00am-5:00pm) of your locker number and locker combination. Please note that when using HSC webmail, it is best to click on "Use the light version" to make attaching the document to an email easier.

