



Service aux laryngectomisés,
Programme d'aide à la communication
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Service aux laryngectomisés,
Programme d'aide à la communication
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ELECTRONIC TABLET LOAN REQUEST

User's identification

Last name: _____ First name: _____

RAMQ: _____ Expiry date: _____

It is the responsibility of the professional making the request to deliver the tablet and train the user in how to use it. However, because the tablet remains the property of the supraregional centre and because it could be loaned to another user at a later date, its initial configuration will be carried out by the distribution centre, including the choice of PIN (personal identification number) to unlock it. In order to enable the device to be easily reinitialized after it is returned to the distribution centre, the user must be warned by the responsible professional **not to change the predetermined PIN.**

Tablet:

Tablet, approximately 10", Android operating system, with case

Application:

Text-to-speech app:

Speech Assistant AAC

Synthesized speech gender:

Male

Female

Synthesized speech language:

French

English

Other: _____

Justification for the loan of another type of tablet or application:

Speech-language pathologist: _____ Telephone: _____

Workplace: _____ Date: _____