

SCIENTIFIC REGISTRY OF TRANSPLANT RECIPIENTS

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LOCATION ADDRESS 914 South 8<sup>th</sup> Street, Suite S4.100 Minneapolis, MN 55404 WEB SRTR.ORG

## **SRTR Technical Assistance Request Form**

Please use this form to request technical assistance for Program-Specific Reports, OPO-Specific Reports, or SAMs.

Send the completed form to <a href="mailto:srtr@srtr.org">srtr@srtr.org</a>.

Contact information for this request:	
Primary Contact Name:	
Alternate Contact Name:	
Organization:	
Mailing Address (include street, city, state, and zip):	
	Email:

- 1. Check one or more box below that best describes your technical assistance needs:
  - \_\_ PSR Support
  - \_\_ OSR Support
  - \_\_ SAM Support
  - \_\_ Other (please describe in #3 below)
- 2. Check the type of support you require (outside of a simple request):
  - \_\_ Complex Request
  - \_\_ Troubleshooting SAM Runtime Errors
  - \_\_ Private Training via Webinar
  - \_\_ Onsite Training
  - \_\_ Other (please describe in #3 below)
- 3. Briefly describe the question or problem facing your organization, the assistance requested, and why you need this technical assistance. If your request is for training, briefly describe the type of training requested and why it is needed.