

Website Change Request Form

This form is for use by College of Health Professions (CHP) faculty and staff and should be used to request changes to CHP webpages.

Who is submitting this requ	uest (Required):
Email Address (Required):	
Telephone Number (Requir	red):
Date of Submission:	
Type of Change:	Change to Existing Content New Content
Urgency of Request:	ASAP Not later than (please provide date) Low Priority
CURRENT/OLD Text/	Content
Please include URL of I	Page(s):
Content to be removed/	changed:

NEW Text/Content	
Please include URL of Page(s):	
Content to add:	
 If you are requesting a document addition/change, please attach a PDF of that document to this request. 	
• If you are requesting a photo/video addition, please send appropriate link and/or .jpg file.	
• If there are multiple major changes to be made, please submit a separate form for each.	

Once completed, please submit this form to Rob Tolleson by e-mail at RJTolleson@uams.edu (preferred) or by fax at (501) 686-6855, ATTN: Rob Tolleson. If you fax it, please be sure to still e-mail any files you needed put on the site

For example, if there are changes for both your "Faculty" page and your "About the

Profession" page, please submit a separate form for each.

Revised: 08-28-2013