CS3319 Assignment 1 – Part 3

Rishabh Jain

DONOR

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Donor Number** | **First Name** | **Last Name** | **Phone Number** | **Street Address** | **City** | **Postal Code** | **Province** | **Blood Number\*** |

APPOINTMENT

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Appointment Number** | **Donor Number\*** | **Clinic Number\*** | **Date** | **Time** |

RECEIVES CALL FROM

|  |  |  |
| --- | --- | --- |
| **Donor Number\*** | **Clinic Number\*** | **Last Call Date** |

CLINIC

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Clinic Number** | **Phone Number** | **Street Address** | **City** | **Postal Code** | **Province** | **Head Staff Number\*** | **Start Date\*** |

CLINIC PHONE NUMBER

|  |  |
| --- | --- |
| **Clinic Number\*** | **Phone Number** |

EMPLOYS

|  |  |  |
| --- | --- | --- |
| **Staff Number\*** | **Clinic Number\*** | **Start Date** |

STAFF

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Staff Number** | **Clinic Number\*** | **First Name** | **Last Name** | **Phone Number** |

STOCKS

|  |  |  |  |
| --- | --- | --- | --- |
| **Clinic Number\*** | **Blood Number\*** | **Blood Stock** | **NotEnoughStock** |

BLOOD

|  |  |  |  |
| --- | --- | --- | --- |
| **Number** | **Type** | **RH Factor** | **Percent** |