



EMPLOYEE CONTACT INFORMATION 2022 - 2023

It is important that we maintain current information on each employee for emergency purposes only. Please contact the Human Resources Office if any of this information changes. Thank you!

Employee Name: _____ DOB: _____

Home Information:

In case of Emergencies:

Home Address: _____

Mailing Address: _____

Primary Phone/Cell #: _____

Circle One

Personal Email Address: _____

PRELIMINARY EMERGENCY CONTACT

Contact Name: _____

Street Address: _____

Relationship to Contact Employee: _____

Primary Phone/Cell #: _____

Circle One

Email Address: _____

SECONDARY EMERGENCY CONTACT

Contact Name: _____

Relationship to Contact Employee: _____

Primary Phone/Cell #: _____

Email Address: _____

ADDITIONAL INFORMATION VOLUNTARY

Primarily Care Physician: _____ Telephone #: _____

Allergies (Food, Mediation, Insect, Etc.): _____

Medical Alert (s): _____

Employee Signature: _____ Date: _____