

EMERGENCY INFORMATION

This information is requested as a service to you in case of emergency. You are not required to give this information.

This form will be kept in your Official Personnel Folder in the Human Resources Department. If you wish to add or change information on this form, you may obtain a new form online at the HR Webpage for new employees, or you may contact your Human Resources Assistant.

Name (last, first, middle initial)

Address (including zip code)

Organization in which employed

Home phone number

IN CASE OF EMERGENCY NOTIFY

Name

Relationship

Home address (including zip code)

Home phone/Business phone

OR

Name

Relationship

Home address (including zip code)

Home phone/Business phone