



Faculty/Staff Emergency Contact Information

***Please Print**

Employee Name: _____

Phone# (area code): _____

Address: _____

City, State, Zip: _____

Email Address: _____

Do you have your Medical ID set up on your Android or iPhone device?
 Yes No If no, please consider setting this up as it helps first responders access your critical medical information from the lock screen, without needing your passcode.

Emergency Contact (EC) Name: _____

EC Phone Number (area code): _____

Relationship to EE (Spouse, Family): _____

EC Contact Name #2: _____

Relationship to EE (Family, Friend): _____

EC #2 Phone Number (area code): _____

Signature

Date