Workplace Violence Handbook Appendix 3 - Emergency Contact Information Sheet

Use of this information sheet is voluntary. The completed form can be given to your supervisor, who will retain it in his/her files and use the information only in the event of an emergency requiring notification of a relative or significant other. If you elect to provide this information to your supervisor, whether using this sheet or in another fashion, you should update it whenever there are changes.

Employee Name:	
Home Address:	
Home Phone Number:	
Emergency Contact Person: (Name and Phone Numbers)	
Alternate Contact: (Name and Phone Numbers)	
Physician Namo:	
Physician Name:	
Physician Phone Number:	
Blood Type:	
Allergies:	

NOTE TO SUPERVISORS: The information on this sheet is confidential and should be stored in a secure location; access to the information should be limited to those with a need to know during an emergency.