



Employee Emergency Contact Information

In order to ensure that the Employee Emergency Contact Information Form is available when an emergency arises, each employee is requested to maintain his or her information at their respective office and/or workplace. The original form will be retained in the Human Resources Office and copies will be provided to the Safety Office and to the employee's timekeeper. It is recommended that the forms be kept in a location that is central and readily available within the immediate workplace. A controlled location and access to the forms is as crucial as the need for this information during an emergency.

Employee Name (please print)	Primary Phone ()
Employee Number	Cell Phone Without Text Capabilities
Physical Address	Cell Phone w/ Text Capabilities
	Home (Landline) Phone
	Alternate Phone ()
	Cell Phone Without Text Capabilities
	Cell Phone w/ Text Capabilities
	Home (Landline) Phone

Notify in Case of Emergency

Name (please print)	Primary Phone ()
Physical Address	Cell Phone Without Text Capabilities
	Cell Phone w/ Text Capabilities
	Home (Landline) Phone
	Alternate Phone ()
	Cell Phone Without Text Capabilities
	Cell Phone w/ Text Capabilities
	Home (Landline) Phone
Relationship*:	

Alternate Contact Person (Optional)

Name (please print)	Primary Phone ()
Physical Address	Cell Phone Without Text Capabilities
	Cell Phone w/ Text Capabilities
	Home (Landline) Phone
	Alternate Phone ()
	Cell Phone Without Text Capabilities
	Cell Phone w/ Text Capabilities
	Home (Landline) Phone
Relationship*:	

* Relationship (for example, spouse/partner/friend/parent/child) section is optional and is only requested to aid the WSDOT staff in the event we must contact this person.)

Signature

Date

C O N F I D E N T I A L