

Employee Emergency Contact Form

Have somebody to telephone when something happens at work, before you need it.

Who to telephone if something happens to a member of staff at work.

PERSONAL DATA — HOLD IT CAREFULLY

Hold this securely and no more widely than necessary — it is personal data about an employee and about somebody who is not your employee at all. Ask before recording anything medical, keep it to what is needed in an emergency, and review it once a year.

Employer	Department	Form completed

THE EMPLOYEE

Name	Job title	Staff number
Home address	Personal phone	

FIRST CONTACT

Name	Relationship	Phone, daytime	Phone, other
Address if different			

SECOND CONTACT

Name	Relationship	Phone, daytime	Phone, other

ANYTHING RESPONDERS SHOULD BE TOLD

Only what the employee is content to share

Employee	Received by	Date