

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