



EMPLOYEE CONTACT INFORMATION

*This information is to be kept on file for **emergency use only.***

EMPLOYEE NAME: _____ DEPARTMENT: _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____
(IF DIFFERENT FROM MAILING ADDRESS)

CELL PHONE #: _____

HOME PHONE #: _____

PERSONAL E-MAIL ADDRESS: _____

EMERGENCY CONTACT PERSON: _____

PHONE #: _____

RETURN COMPLETED FORM TO THE CITY MANAGER'S OFFICE ASAP.
THANK YOU FOR YOUR COOPERATION.

This information is only to be used for emergency purposes. Personal e-mail may be used in an event of an emergency where our Continuity of Operations Plan was implemented.

Check Here if you do not have a City e-mail address or do not have a worksite computer and would like to receive employee notices, newsletters, etc., at your personal e-mail address.