

# Emergency Contact Form

The Senate Human Resources & Fiscal staff requires contact information for communication about health benefits, life insurance, payroll, retirement, and other personal employment business. This information may also be used for open enrollment and other self-service transactions, as well as when your health and wellbeing require.

Please provide contact information we may actively use for personal business purposes. Please keep in mind such communication may occur after you are no longer an employee.

Please return this form to the Senate HR & Fiscal office.

(Please Print)

## Personal Information

Employee Name: \_\_\_\_\_

E-Mail Address : \_\_\_\_\_

Phone Number : \_\_\_\_\_

## Emergency Contact Information

Emergency Contact Name:

\_\_\_\_\_

Relationship to Employee: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional Phone Number: \_\_\_\_\_

**This information will not be listed or published externally, and will only be used to communicate with you on matters related to your pay and benefits; or when your personal health and wellbeing require.**