

Yosemite Community College District Human Resources

EMERGENCY CONTACT INFORMATION

Print Employee Name	Colleague ID #	Colleague ID #		Date of Birth		
Street Adress (No PO Boxes)	City	Zip				
Department	Department Phone #	At:	MJC	CC	YCCD	
Check all that apply: Stud	dent Short-Term Adjunct	Classified	Facult	ty N	/Igmt/Admin	
In Case of Emergency, please	e notify the following:					
Print Contact Name		Relationship				
Daytime Number	Evening Number	Cell	Number			
2. Print Contact Name		Relationship				
Daytime Number	Evening Number	Cell Number				
3. Print Contact Name		Rel	ationship			
Daytime Number	Evening Number	Cell Number				
Signature			2			

Please return your completed form to the Human Resources Office. This information will be kept in your Personnel File.