



CONFIDENTIAL
Staff Emergency Contact
Information

Name For the school year

Address Primary phone - -

Cell phone - -

Work Location - Check ALL that apply

Support Services Transportation District Office Stillaguamish Valley Learning Center Weston Haller
 APPLE Eagle Creek Kent Prairie Pioneer Presidents Arlington High Post

Arlington Open Doors

Emergency contact #1

Relationship to employee

Primary phone - - Cell phone - -

Emergency contact #2

Relationship to employee

Primary phone - - Cell phone - -

Emergency contact #3

Relationship to employee

Primary Phone - - Cell phone - -

Information that may be useful in the event of an emergency (optional)

Allergies to:

Medications taken:

Medical condition:

Hospital preference

Physician's name and phone

Please send an electronic copy to your building nurse (secretary for transportation and support services) and to Human Resources.