

**SCHOOL DISTRICT OF THE CITY OF HARPER WOODS
HARPER WOODS, MI 48225-1395**

TO BE COMPLETED BY ALL EMPLOYEES

Directory/Emergency Information 2019-2020

NAME OF EMPLOYEE _____
BUILDING _____ POSITION _____
GRADE OR SUBJECT TAUGHT _____
HOME ADDRESS _____ CITY _____ ZIP _____
PHONE _____ ALTERNATE PHONE _____
ALTERNATE E-MAIL ADDRESS _____ (Optional)

PLEASE
CHECK BOX IF
THIS IS A NEW
ADDRESS BEING
REPORTED.

HIGHLIGHT INFORMATION ABOVE YOU DO NOT WANT SHARED WITH DISTRICT EMPLOYEES

THIS INFORMATION BELOW IS NOT SHARED UNLESS IN AN EMERGENCY SITUATION ONLY

IN CASE OF EMERGENCY

NAME _____
ADDRESS _____ PHONE _____
BUSINESS ADDRESS _____ PHONE _____
RELATIONSHIP _____

If first choice is unavailable, please contact:

NAME _____
ADDRESS _____ PHONE _____
BUSINESS ADDRESS _____ PHONE _____
RELATIONSHIP _____

COMMENTS: (necessary for first responders; i.e. blood type, allergies, etc.) _____

Any changes in the information listed above must be recorded immediately.