

Melrose Public Schools
Melrose, MA 02176

EMPLOYEE EMERGENCY INFORMATION SHEET

Date: _____

School: _____

Please Print

Name: _____
First M. Last

Address: _____
Street

_____ City State Zip

Telephone Number: (_____) _____

IN CASE OF EMERGENCY, NOTIFY (List two)

Name _____

Home Telephone Number: (_____) _____

Work/Cell Telephone Number: (_____) _____

Name _____

Home Telephone Number: (_____) _____

Work/Cell Telephone Number: (_____) _____