



Human Resources
Employee Contact Information

SECTION I – EMPLOYEE INFORMATION

Name (Last, First, Middle Initial)	Effective Date
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SECTION II – BASIC INFORMATION

New Change

Home Address	City	State	Zip Code
Home Address (Mailing)	City (Mailing)	State	Zip Code
Phone Number (Home)	Phone Number (Cell)		
Email Address (Home)	Email Address (Alternate)		

SECTION III – EMERGENCY CONTACT(S) INFORMATION

In the event that you are involved in a severe accident or other emergency while at work who do you wish to have contacted to contact on your behalf? This information is confidential and will be used in emergency situations only. It will be maintained in your personnel file at the district office.

New Change

Emergency Contact (1) --Name	Emergency Contact (1) -- Phone
Emergency Contact (2) -- Name	Emergency Contact (2) -- Phone
Emergency Contact (3) -- Name	Emergency Contact (3) -- Phone

SECTION IV – NOTIFICATIONS

Eaton RESA uses an automated system to contact employees with important work information, including building closures (i.e. power outages, illness, weather) Please enter information below for the way(s) you want to be contacted.

New Change

Via Phone Call to Phone Number (Home)	Via Phone Call to Phone Number (Cell)
Via Text Message to Phone Number (Home)	Via Text Message to Phone Number (Cell)
Via Email to Email Address (Home)	Via Email to Email Address (Alternate)

SECTION V – REMINDERS & ACKNOWLEDGMENTS

- Employee is responsible for notifying all of the following: Office of Retirement Services (ORS), Health Insurer, Vision insurer, Dental Insurer, and MRIC (403b & 457).
- I affirm that the information provided in this form is true and correct to the best of my knowledge.

SIGNATURE: Employee Date

SECTION VI – CONTACT/MAILING INFORMATION (SEND COPY OF COMPLETED FORM To:)

HUMAN RESOURCES 1790 East Packard Hwy. Charlotte, MI 48813	FAX: 517-543-6633 or 866-579-5232 Phone: 517-541-8712 Email: jvanhoesen@eatonresa.org
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