



# Human Resources

## Employee Contact Information

### SECTION I – EMPLOYEE INFORMATION

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

<input type="checkbox"/> New		<input type="checkbox"/> 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.

<input type="checkbox"/> New		<input type="checkbox"/> 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.

<input type="checkbox"/> New		<input type="checkbox"/> Change	
Via <u>Phone Call</u> to Phone Number ( <u>Home</u> )	Via <u>Phone Call</u> to Phone Number ( <u>Cell</u> )		
Via <u>Text Message</u> to Phone Number ( <u>Home</u> )	Via <u>Text Message</u> to Phone Number ( <u>Cell</u> )		
Via <u>Email</u> to Email Address ( <u>Home</u> )	Via <u>Email</u> to Email Address ( <u>Alternate</u> )		

### 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](mailto:jvanhoesen@eatonresa.org)