**3. Know Your Employees**

Use this form to record information about all employees, including the business owner, so that each person can be contacted at any time.

*Last Updated: Click or tap here to enter text.*

*Next Update: Click or tap here to enter text.*

**EMPLOYEE NAME:** *Click or tap here to enter text.*

Position/title: *Click or tap here to enter text.*

Key responsibilities: *Click or tap here to enter text.*

Alternative employee who can perform these duties: *Click or tap here to enter text.*

Home address: *Click or tap here to enter text.*

City, state, ZIP: *Click or tap here to enter text.*

Office phone: *Click or tap here to enter text.* Ext. *Click or tap here to enter text.*

Alternate phone: *Click or tap here to enter text.*

Home phone: *Click or tap here to enter text.*

Mobile phone: *Click or tap here to enter text.*

Office e-mail: *Click or tap here to enter text.*

Personal e-mail: *Click or tap here to enter text.*

Special needs: *Click or tap here to enter text.*

**Certifications:**

[ ]  First Aid [ ]  Emergency Medical Technician (EMT) [ ]  CPR [ ]  Ham Radio

[ ]  Other: [ ]  Special Licenses:

**Evacuation Information**

County: *Click or tap here to enter text.*

Evacuation zone: *Click or tap here to enter text.*

Evacuation destination: *Click or tap here to enter text.*

**Local Emergency Contact**

Full name: *Click or tap here to enter text.*

Relationship: *Click or tap here to enter text.*

Home phone: *Click or tap here to enter text.*

Mobile phone: *Click or tap here to enter text.*

E-mail: *Click or tap here to enter text.*

**Out of State Emergency Contact**

Full name: *Click or tap here to enter text.*

Relationship: *Click or tap here to enter text.*

State: *Click or tap here to enter text.*

Home phone: *Click or tap here to enter text.*

Mobile phone: *Click or tap here to enter text.*

E-mail: *Click or tap here to enter text.*

Notes: *Click or tap here to enter text.*