EMPLOYEE CONTACT INFORMATION

Date: [Insert Date]

EMPLOYEE DETAILS:

Full Name: [First Name] [Last Name]

Employee ID: [ID Number]

Department: [Department Name]

Job Title: [Position]

CONTACT INFORMATION:

Home Address: [Street, City, State, Zip Code]

Personal Phone: [Phone Number]

Work Phone: [Extension Number]

Personal Email: [Email Address]

Work Email: [Company Email Address]

EMERGENCY CONTACT:

Contact Name: [Full Name]

Relationship: [e.g., Spouse, Parent, Friend]

Contact Phone: [Phone Number]