

## EMPLOYEE INFORMATION FORM

The HR Department is currently updating all employee information. This is necessary for many reasons, some of which include being able to mail information to employee's homes, emergency contact information, and completing the HCC Catalog. Please assist us in gathering this information by completing the form.

EMPLOYEE INFORMATION		
NAME:		
ADDRESS:		
PHONE NUMBERS:		
Home:	Cell:	Office Extension:
SPOUSE/DEPENDENT INFORMATION		
Spouse Name:		
Spouse Address:		
Spouse Home Phone #:	Work #:	Cell #:
Dependent Name:		
Dependent Address:		
Dependent Home Phone #:	Work #:	Cell #:
Dependent Name:		
Dependent Address:		
Dependent Home Phone #:	Work #:	Cell #:
Other Dependent Information:		
EMERGENCY CONTACT INFORMATION:		
Name:		
Relationship:		
Address:		
Phone Number 1:	Phone Number 2:	
COLLEGE AND DEGREE INFORMATION:		
<i>Please list each degree received and every school attended.</i>		
College Name:	Degree:	
College Name:	Degree:	
College Name:	Degree:	
College Name:	Degree:	