

Address and Emergency Form

DATE:				EMPLOYEE NAME:	
CIRCLE LOCATION:	San Francisco	Los Angeles	Sacramento	SUPERVISOR NAME:	

To all employees: From time to time it has been necessary to locate relatives or designated individuals due to an emergency situation involving an employee of the Commission. In order to reasonably assure notification of the person to be contacted in case of an emergency, please list below the individual, complete with address and telephone number. If the individual named is employed, please include business address and telephone number & return this form to Human Resources.

EMPLOYEE'S HOME ADDRESS:	PHONE #:
IN CASE OF EMERGENCY:	
Name:	Relationship to Employee:
Home Address:	Phone #:
Business Address:	Phone #:

PRIVACY NOTIFICATION FOR CPUC: EMERGENCY FORM

The Information Practices Act of 1977 (effective July 1, 1978) requires the Commission to provide the following notification to individuals completing the attached form.

Completion of this form is requested by the California Public Utilities Commission, Human Resources. The Human Resources Manager at 505 Van Ness Avenue, San Francisco, CA 94102, (415) 703-1902, is responsible for maintaining record.

This information is collected pursuant to the authority of the Executive Director to employ persons to aid the Commission in the performance of its duties and the exercise of its powers set forth in the Constitution – (Public Utilities Code, Section 309). The principle purpose of collecting such information is to notify designated persons if the employee is involved in an emergency.

Completion of this form is voluntary; however, non-completion or completion in part may prevent a responsible party from being notified that an employee has been involved in an emergency.

Individuals completing this form have the right to review personnel files maintained by the Human Resources, unless such files are confidential as defined by Civil Code, Section 1798.3(a).