

EMPLOYEE EMERGENCY INFORMATION SHEET

Please complete this worksheet to help us identify barriers that could arise in an emergency situation and to provide suggestions on how to overcome them. Your input will help us to provide you with individualized emergency information.

The information collected is confidential and will only be shared with your consent. You do not have to provide details of your medical condition or disability; only the type of help you may need in an emergency.

Date: _____

EMPLOYEE INFORMATION

Name: _____

Department: _____

Telephone: _____ Cell Phone: _____

Email: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Telephone: _____ Cell Phone: _____

Email: _____

Relationship: _____

WORK LOCATION

1. Where do you work?

Location: _____

Location: _____

Location: _____

2. Do you work in these different locations on a regular basis? YES or NO

3. Please list potential emergency response barriers for each site you regularly work at.

4. Can you see or hear the fire/security alarm system? YES or NO

If the answer is NO, what would help you know the alarm was flashing/ringing?

5. Can you activate the fire/security alarm system? YES or NO

If the answer is NO, what would help you sound the alarm?

6. Can you talk to emergency staff? YES or NO

If the answer is NO, what would help you communicate with them?

7. Can you use the emergency exits? YES or NO

If the answer is NO, what would help you to exit the building?

8. Does your mobility device fit in the emergency waiting area? YES or NO

If the answer is NO, what would help it fit, or is there a better location?

9. Could you find the exit if it was smoky or dark? YES or NO

If the answer is NO, what would help you find the exit?

10. Can you exit the building by yourself? YES or NO

If the answer is NO, what would help you to get out?

11. Can you get into an emergency evacuation chair by yourself? YES or NO

If the answer is NO, what help do you need?

12. Would you be able to evacuate during a stressful and crowded situation? YES or NO

If the answer is NO, what would help you to evacuate?

13. Can you read/access our emergency information? YES or NO

If the answer is NO, what would make this information available to you?

14. If you need help to evacuate, what instructions do people need to help you?

15. If you need other accommodations in an emergency, please list them here: