|  |
| --- |
| **Local contact e.g. employer, onsite supervisor** |
| Name: |
| Phone: |
| Email: |

|  |
| --- |
| **University contact**  |
| Name/Role: |
| Phone: |
|  Email:  |

|  |
| --- |
| **next of kin** |
| Name: |
| Phone: |
|  Email:  |

|  |
| --- |
| **GP** |
| Name: |
| Phone: |
| Address: |

|  |
| --- |
| **emergency services** |
| Police/Ambulance:  |
| Fire Department: |
|  |

|  |
| --- |
| **Local embassy/consular assistance**  |
| Address |
| Phone |
|  |

|  |
| --- |
| **Next of kin alternative** |
| Name: |
| Phone: |
|  Email:  |

|  |
| --- |
| **Insurance** |
| Company: |
| Phone: |
|  Email:  |

|  |
| --- |
| **Local Hospital** |
| Address: |

|  |
| --- |
| **other emergency contacts** |
| Name |
| Phone |
|  |

EMERGENCY CONTACT LIST