

Macon State College
Office of Residence Life
Emergency Contact Information (preferably someone in the US)

The Office of Residence Life considers the safety and security of student residents to be a primary concern. All residential students are required to complete this Emergency Contact Information form as a part of the check in process. This form requests contact information for two people and will be utilized in cases of emergency. The form also requires a listing of all medical conditions or allergies for notification of medical personnel in case of emergencies.

Residents under the age of 21 must list a parent or legal guardian as one of the two contacts.

Student's name: _____ **MSCID #926-** _____

First Emergency Contact Name: _____

Relationship to the Student: _____

Address: _____

Telephone Number: _____ Cell Phone Number: _____

Email Address: _____

Second Emergency Contact Name: _____

Relationship to the Student: _____

Address: _____

Telephone Number: _____ Cell Phone Number: _____

Email Address: _____

Please list all information that may help our office in better responding to any emergency situations (e.g. allergies, medical conditions, etc.):

I understand that a member of the Residence Life staff has the right to contact the individuals listed above in the event they believe doing so is required to protect my safety or the safety of the members of the college community.

I understand it is my responsibility to update this information as necessary.

Student Signature

Date