

**VISALIA UNIFIED SCHOOL DISTRICT**  
**EMPLOYEE INFORMATION**

**EMERGENCY CONTACT INFORMATION:**

Classified\_\_\_\_ Certified\_\_\_\_

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

SCHOOLSITE/DEPARTMENT: \_\_\_\_\_

**Voluntary Emergency Response Information:**

EMERGENCY CONTACTS: (It is your responsibility to update this form ASAP if any information changes.)

Name: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Name: \_\_\_\_\_ Phone(s): \_\_\_\_\_

1. Please list any health conditions, medications, and/or allergies/allergic reactions that you want to be brought to the attention of the nurse/medical provider in case of a medical emergency: \_\_\_\_\_

2. Please list the name and phone number of your doctor:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

If the above named physician is not available, I authorize the school authorities to transport me to a hospital or medical facility. I authorize consent to any x-ray, examination, anesthesia, medical or surgical diagnosis or treatment and hospital care deemed necessary by the licensed physician. SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**EMPLOYEE RACE/ETHNICITY INFORMATION:** New federal guidelines require that we gather race/ethnicity information on all employees in a two part question. Please complete the information listed below:

**WHAT IS YOUR ETHNICITY? (Please check one)** ☐ Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race) ☐ Not Hispanic or Latino

**WHAT IS YOUR RACE? (Please check up to five racial categories)**

*The above part of the question is about ethnicity, not race. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your race(s) to be.*

☐ American Indian or Alaskan Native(100)  
(Persons having origins in any of the original people of North, Central or South America )  
☐ Chinese (201)  
☐ Japanese (202)  
☐ Korean (203)  
☐ Vietnamese (204)  
☐ Asian Indian (205)

☐ Laotian (206)  
☐ Cambodian (207)  
☐ Hmong (208)  
☐ Other Asian (299)  
☐ Hawaiian (301)  
☐ Guamanian (302)  
☐ Samoan (303)

☐ Tahitian (304)  
☐ Other Pacific Islander (399)  
☐ Filipino/Filipino American (400)  
☐ African American or Black (600)  
☐ White (700) (Persons having origins in any of the original peoples of Europe, North Africa, Northwestern Asia or the Middle East)