



Manville High School

• 908.231.8500

1100 Brooks Blvd., Manville, NJ 08835 • www.manvilleschools.org

José Celis
Principal

Stephen Venuto
Vice Principal

Mustang Senior Internship Program Emergency Contact Form

This form is designed to ensure the safety and well-being of your child during their Internship experience. Please provide accurate and complete emergency contact information, as well as details about their primary healthcare provider and preferred hospital. This form will be shared with your child's internship supervisor on their first day.

Student Name	
Date of Birth	
Placement	

Emergency Contacts:

In the event of an emergency, please provide 2-3 emergency contacts in order of priority.

1. Primary Emergency Contact

- a. Name: _____
b. Relationship to Student: _____
c. Phone Number: _____

2. Secondary Emergency Contact

- a. Name: _____
b. Relationship to Student: _____
c. Phone Number: _____

3. Additional Emergency Contact (optional)

- a. Name: _____
b. Relationship to Student: _____
c. Phone Number: _____