



West Valley Central School

2026-27 Employee and Emergency Contact Information

Employee Name: _____

Position: _____ Date: _____

Full Home Address:

Street: _____

Town, State, Zip: _____

Phone Number #1: _____

Is it okay to use this number for school messaging? Yes ☐ No ☐

Okay to Text? Yes ☐ No ☐

Okay to Call? Yes ☐ No ☐

Phone Number #2: _____

Is it okay to use this number for school messaging? Yes ☐ No ☐

Okay to Text? Yes ☐ No ☐

Okay to Call? Yes ☐ No ☐

Emergency Contact Person #1

Name: _____

Relationship: _____ Phone Number: _____

Emergency Contact Person #2

Name: _____

Relationship: _____ Phone Number: _____