



**Border Land School Division  
Employee Information Sheet**

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

Current Position at BLSD: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Residence (physical) Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

First Family Contact: \_\_\_\_\_

First Family Contact Work Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Names of Dependents living with you: \_\_\_\_\_

\_\_\_\_\_

Second Family Contact: \_\_\_\_\_

Second Family Contact Home Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Two other emergency contact people (consent must be given to be listed)**

Name / Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name / Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_

Employee Signature

Information update will be requested annually by the division. Information updates to be provided as circumstances change by the employee. Information will be retained on file by the school for reference in the event of an emergency. Original forms will be on file at division office.

This personal information is being collected under the authority of Border Land School Division policy and will be used **for purposes of divisional administration**. It is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection of information, please contact the Division's Secretary Treasurer at 120 – 9<sup>th</sup> Street NW Altona MB R0G 0B1 Ph. 204-324-6491, email [blsd@blsd.ca](mailto:blsd@blsd.ca)