



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

Please supply contact numbers of people who should be contacted in the case of an emergency. Please remember to give **full** numbers, including **country codes** and **area codes**.

**Local (in Thailand).**

<b>Name</b>	<b>Relation to Teacher</b>	<b>Telephone number</b>
1.		
2.		
3.		
4.		

**Abroad**

<b>Name</b>	<b>Relation to Teacher</b>	<b>Telephone number</b>
1.		
2.		
3.		
4.		

I hereby give IDEAL English Academy permission to contact the individuals listed above in the unfortunate event that I am hospitalized and am unable to inform concerned parties of my condition. I understand that said parties shall not be contacted except for the purposes stated herein. I also hereby acknowledge that I have submitted this information voluntarily.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Printed Name of Employee

\_\_\_\_\_  
Date