

Texas Academy of Mathematics and Science
Emergency Contact Information

This form is to be used to guide communications regarding discipline and emergency situations. **Please print all information in black ink.** *If this or any primary contact information (i.e. addresses or phone numbers) change during the year, please contact the Student Life Staff at 940-565-4955 to update the information.*

Student First & Last Name: _____ UNT ID (8 #s): _____

Who should legally be contacted regarding discipline? (check all that apply; submit legal documentation as needed)

- Guardian 1 Guardian 2 Secondary 1 Secondary 2

Who should legally be contacted in the case of an emergency? (check all that apply; submit legal documentation as needed)

- Guardian 1 Guardian 2 Secondary 1 Secondary 2

Primary Guardian 1 Name: _____	
Relationship: _____	
Home phone number: _____	Cell phone number: _____
Work phone number: _____	City: _____

Primary Guardian 2 Name: _____	
Relationship: _____	
Home phone number: _____	Cell phone number: _____
Work phone number: _____	City: _____

Secondary Custodian 1 Name: _____		<input type="checkbox"/> Not applicable
Relationship to student: _____		
Address: _____		
City: _____	State: _____	Zip: _____
E-mail: _____	Home phone number: _____	
Work phone number: _____	Cell phone number: _____	

Secondary Custodian 2 Name: _____		<input type="checkbox"/> Not applicable
Relationship to student: _____		
E-mail: _____		
Home phone number: _____		
Work phone number: _____		
Cell phone number: _____		

ALTERNATE CONTACT PERSON(S) IN AN EMERGENCY: [*At least 1 is Required]

In the event of an emergency, TAMS staff will seek to contact Primary and Secondary Custodians first. In the case Primary and Secondary are unable to be reached, Alternate Contacts are to serve as a contact near your residence who can help staff contact Primary Custodians. Please remember to notify the Student Life Office if contact information changes at any time so the information can be updated. **Alternate contact(s) must live in Texas.**

*Person 1 _____	*Relationship to student: _____
City/State _____	Home phone # _____
Work Phone # _____	Cell phone # _____

Person 2 _____	Relationship to student: _____
City/State _____	Home phone # _____
Work Phone # _____	Cell phone # _____