



**SCHOOL OF ELECTRICAL ENGINEERING
& TELECOMMUNICATIONS
STAFF CONTACT DETAILS**

ID NO _____
TITLE _____
SURNAME _____
FIRST NAME _____

POSITION IN EE&T _____
ONGOING **FIXED TERM** **Termination date** _____
SUPERVISOR/MANAGER _____
ROOM NUMBER _____ **TELEPHONE EXTENSION** _____
EMAIL _____

HOME ADDRESS _____

HOME TELEPHONE _____
MOBILE _____

EMERGENCY CONTACT DETAILS
NAME _____
RELATIONSHIP _____
ADDRESS _____

TELEPHONE (HOME) _____
TELEPHONE (WORK) _____
MOBILE _____

Insert today's date: _____