

Emergency Contact Information Form

F-1 J-1 (Please check one)

Student's Name: _____
Last First MI

CSUN ID Number: _____

E-mail: _____ Alternate E-mail: _____

Phone: _____

Major: _____

In case of an emergency while you are studying at California State University, Northridge, please list anyone who you would like us to contact, and with whom you will allow us to share information about your location, situation and logistical requirements.

Emergency Contact Name (in the U.S.) _____
Last First

Relationship to you: _____

Address: _____

E-mail: _____

Cell Phone: _____ Work Phone: _____ Home Phone: _____

Emergency Contact Name (outside the U.S.) _____
Last First

Relationship to you: _____

Address: _____

E-mail: _____

Phone Number (Please include country code and city code): _____

Fax Number (Please include country code and city code): _____

Student's Signature _____ Date: _____