**Emergency Evacuation Self-Identification Form\***

Name (First, Last):

Department:

Building: Room:

How can we contact you?

Telephone #: Cell Phone #:

Email address:

TTY#:

Other:

Please submit the completed form to the FXB Entrance Security Station or via email to [security@hsph.harvard.edu](mailto:security@hsph.harvard.edu)

A member of Harvard Environmental Health and Safety will contact you to develop an evacuation plan.

*\*Completing this form is voluntary. The information provided is confidential and will be used for emergency response purposes only.*