

EMERGENCY INFORMATION

PLEASE WRITE IN BLOCK LETTERS

Residential Address

Name of Student - First _____ Middle _____ Surname _____

Name of Parents or Legal Guardian _____

Physical Home Address of Student _____

Distinguishing Landmarks and their Proximity to your Residence _____

Mother's Mobile _____ Father's Mobile _____ Home Telephone _____

Alternative Address in Case No One Can be Contacted at Above Address

Name of Alternative Family or Office _____

Physical Address of Alternative Family or Office _____

Distinguishing Landmarks and their Proximity to Alternative Family or Office _____

Alternative Telephone _____ Alternative Mobile Telephone _____

Alternative Contact Information Outside of Uganda if Applicable

Name of Alternative Contact _____ Relationship to Student _____

Country _____ Telephone _____ E-Mail Address _____