



GENERAL ORDER

Emergency Contact Information

Date: January 29, 2021

Number: 21.010

Effective Date: January 29, 2021

Expiration Date: N/A

Approved By: Darren L. Stevens, Fire Rescue Chief

Workforce Telestaff has now been configured to have an area for Emergency Contact Information. This information will be protected and only used in case of emergency. All Operational, Administrative, and Part-Time staff will be able to update this information on their own. It is imperative that this information be entered, and updated regularly. Staff will have until **February 5th** to update their profiles before an audit will be completed.

Access to this information will be limited. Lieutenants and Captains will be able to access their shift personnel's. Battalion Chief, EMS Supervisor, Assistant Chief, Chief, and WFTS System Administrators will have access to all personnel.

Steps to complete:

1. Log into WFTS
2. Navigate to "My Info"
3. Click into the "Profile" section
4. Scroll to the bottom right and complete the fields labeled "Emergency Contact Name", "Emergency Contact Phone Number", and "Emergency Contact Address".
5. Once completed click "Save"

Please see the graphic below for more information.

Questions regarding this General Order should be directed to Captain Brian Latham or Technician Jordan Coleman.

| | |
|----------------------|--------------------------------|
| 01/03/2017 | mm/dd/yyyy |
| Drivers License | Additional date field Two |
| <input type="text"/> | mm/dd/yyyy |
| License Class | Additional date field Three |
| <input type="text"/> | mm/dd/yyyy |
| License Expiration | Additional date field Four |
| mm/dd/yyyy | mm/dd/yyyy |
| Alpha String | Additional Number field One |
| <input type="text"/> | <input type="text"/> |
| External ID | Additional Number field Two |
| <input type="text"/> | <input type="text"/> |
| Formula ID | Additional Number field Three |
| <none> | <input type="text"/> |
| Log As | Additional Number field Four |
| <self> | <input type="text"/> |
| | Emergency Contact Name |
| | <input type="text"/> |
| | Emergency Contact Phone Number |
| | <input type="text"/> |
| | Emergency Contact Address |
| | <input type="text"/> |

3. Complete the three bottom fields

