

**Personal information and list of relatives for employees at the Department of .....,  
Lund University School of Economics and Management. It is voluntary to provide this information.**

Employee has sole responsibility for submitted information and to change it when needed.

**PERSONAL INFORMATION**

<b>Name</b>	
<b>Home address</b>	
<b>Phone number</b>	
<b>Social Security Number</b>	
Allergies or illness that can lead to acute conditions (e.g. asthma, diabetes, epilepsy, allergy to nuts)	
Medication, which is good to know about (optional)	

**RELATIVES** – please list them in the order you prefer us to contact them. Keep in mind that they must be at least 18 years old.

<b>Name</b>	<b>Address</b>	<b>Phone number</b>
1 <sup>st</sup>		
2 <sup>nd</sup>		
3 <sup>rd</sup>		

Hand in the form to ....., dated and signed.

Lund ...../..... 20.....

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It is your responsibility to inform your relatives that Lund University is processing their personal data in accordance with GDPR.