



## Personell Questionnaire

### Emergency contact

With my signature I declare, that the named person is informed and agrees that the following personal data will be stored within Accenture.

The data includes first- and last name, relation to Accenture Employee, Address and Telephone Number. Upon request the data can be deleted anytime.

The contact Person will be called in case of an emergency with my person.

Last name: .....

First name: .....

Relation:

- ☐ Parents
- ☐ Sister / Brother
- ☐ Spouse
- ☐ Other

Address: .....

.....

Telephone Number .....

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature