CAHAN (CAlifornia Health Alert Network) Update Form

Please complete this form and a)submit by e-mail "Email Form" button or b) "Print form" then fax to (805)788-2715

If you have any questions, please contact the Public Health Emergency Preparedness office at: (805)788-2923 or (805)788-2067; email:phep@co.slo.ca.us

Date:

Name: LAST, FIRST M.I.:	Title:
Organization:	Dept:

Work Address:	City:	Zip Code:

Work Email Address (required) :

Professional Licenses:	Languages Spoken in addition to English:
	☐ Spanish ☐ Tagalog Other:
Specialities:	☐ American Sign Language

It is important that we are able to contact you 24 hours a day, 7 days a week in case of a public health emergency.

In the section below, please include at least one 24 X 7 method of contact along with at least 1 additional contact method.

Rank the order of each method in which you prefer to be notified 1 being the 1st, 2 being 2nd and so on.

Note: your work email (as indicated above) is automatically included as a contact method and will always be included in the methods we will notify you at.

Rank→	Desk Phone-answered only by you	Ext.	Ok to leave message
Rank→	Work Cell-NOT personal cell:		Can receive SMS text message
Rank→	Personal Cell:	Can receive SMS text message	
Rank→	Personal Email: *(if not accessed by anyone else)*		
Rank→	Home Landline Phone:	OK to leave a message on home phone	
Rank→	Other:		

Delete me from CAHAN. Please explain:

Update User Steps

Date Updated:	By:	Comments:

External ID: (if other than work email)

☐ Updated in PH Alerting Database (if not in County SLO directory)

Delete User Steps

Date Removed:	By:	Reason:

☐ Removed from CAHAN System   ☐ Removed from PH Alerting Database-if applicable

rev 8-23-19 rph