



Office of  
Emergency Management

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Division of Administration  
& Finance

**Emergency Relocation Position Information Sheet**

Name:

Department:

Title:

Phone Number:

Email:

Supervisor:

Below briefly describe the essential function you are performing and/or supporting for your department:

What training requirements are needed to perform this essential function (Peoplesoft, TRAM):

What resources do you need to perform this essential function (computer, internet access, handbook, policy, equipment):