

Department of Energy
Request for Assistance During an Emergency
Employee Self Identification

This form is to be used by persons who expect that they will need assistance during an emergency. The purpose of this form is to help Program Office supervisors and the Incident Management Team ensure that plans are in place to assist persons with temporary or permanent disabilities during an emergency. The Incident Management Team would rather work with someone on a specific plan of action before an emergency than have an individual experience a problem in the middle of an emergency.

Note: There are many conditions which might require assistance during an emergency. Conditions can be temporary (e.g., a broken leg, on chemotherapy drugs, or pregnancy) or permanent (e.g., a hearing loss, an amputated limb, asthma).

Completion of this form is voluntary. Any information provided will be kept confidential and shared with those having a need to know (e.g., the assigned assistant, the Program Office Safety and Health Representative, the Health Clinic, and the Incident Management Team). The information may be aggregated into lists, charts, and/or graphs. Information provided need only describe the kind of assistance required during an emergency. **Disclosure of any medical condition is not necessary. Employees should provide only information that will be essential to those assisting them.**

Upon completion of the form, please return it to your immediate supervisor. Supervisors shall forward the original to the Office of Headquarters Safety, Health and MA Security in Room GE-112. Call 202-586-1005 for additional information and guidance.

I request special assistance during emergencies:

Name: _____ Organization (including code): _____
Phone Number: _____ Duty Hours: _____
Building: _____ Office Location: _____
Supervisor: _____ Supervisor's Phone Number: _____
Floor Warden: _____ Assistant: _____

The following is a description of the type of assistance I will require:

My condition is: permanent
 temporary

If temporary, I will not need assistance after (date): _____

Thank you,

Signature: _____ Date: _____

The following information is provided as general guidelines for your use during an emergency:

Evacuation Exercise: During an evacuation exercise (fire drill) you should go to the nearest stairwell or area of refuge. Go to an area where you will not impede the flow of the evacuation traffic and wait until the main volume of traffic has passed. Once the other evacuees have passed, use the emergency communication device in the stairwell to contact emergency responders and provide your name and location. Remain in your location until the “all clear” is announced, indicating that the exercise is over. There is no need for you to attempt to evacuate the building.

Emergency Evacuation: During an emergency evacuation of the building you should go to the nearest stairwell. Go to an area where you will not impede the flow of the evacuation traffic and wait until the main volume of traffic has passed. Once the other evacuees have passed, use the emergency communication device in the stairwell to contact emergency responders. Provide your name and location and be guided by the instructions given by responders. Depending on the type and location of the emergency you could be instructed to do one of the following.

- Remain in your current location
- Move to an area of refuge in a different area in the building
- Attempt to evacuate the building

*If you are directed to move, or make the decision to move, it is important that you keep Security informed of your progress. They will notify emergency response personnel of your location which will allow them to reach you quicker.