



Emergency Evacuation Plan



| | | | | |
|---|------------|-----------------------|-----------------------|-----------------|
| Fire/Paramedics/Police | 911 | Poison Control | 1-800-222-1222 | |
| Name of Classroom/building | | Telephone # | | |
| Address | | City | State | Zip Code |
| What actions will be taken by the person discovering a fire, natural disaster, or other emergency in the classroom? | | | | |
| What method will be used to “sound the alarm” to others on the premises? | | | | |
| Who will take responsibility for the children in the event of a fire, natural disaster, or other emergency? | | | | |
| What action will be taken to evacuate the classroom? | | | | |
| Describe the plan for notification regarding the whereabouts and well-being of the children following the evacuation. | | | | |
| What Action will you take while waiting for the fire department or other emergency personnel and where you will meet families? | | | | |
| Emergency Supplies | | | | |
| Where will food, water, medication, and other necessary supplies be stored? | | | | |
| Who will be responsible for accessing these supplies at the time of an emergency? | | | | |