## Imformation for the classroom Emergency Plan Teacher: \_\_\_\_\_ Group: \_\_\_ # Of Students: \_\_\_\_\_ Year: \_\_\_\_\_ School Information Name Phone \_\_\_\_\_\_ Address \_\_\_\_\_\_ Director \_\_\_\_\_\_ Municipality \_\_\_ # Of Students \_\_\_\_\_\_

	Emergency Phone Numbers	
Police:		
OMME: _		_
Firefighte	rs:	
_		
-		

Person in charge of the Gate keys
Name:
Position/location:
Phone:
Name:
Position/location:
Phone:



Remember that during the emergency is easier the communication using text messages



## Artículos en su mochila de seguridad

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□ First aid kit	□ Nonperishable Food	□ Whistle
☐ Personal hygiene items	□ Notebook and pencil	□ Radio
□ Garbage bags	□ Red paint	☐ Flashlight and batteries
□ Sunblock	□ Green paint	□ Water
□ Copies of important doc.	□ Picture of family members	□ Cash
□ Pain pills	□ Gloves	□ Blanket
□ Multipurpose tool	□ Evacuation Map	□ Emergency plan
☐ Games/cards	☐ List of parents with phone numbers	
☐ Students pictures	o o	
0	o	

Student	(s) with special needs
Name:	
Condition:	
Treatment	:
Contact: _	
	:
	:
Name:	
Name: Condition:	
Name: Condition: Treatment	
Name: Condition: Treatment Contact: _	

Additional items in the classroom					
☐ Fire extinguisher	□ Clothes				
☐ Disposable towels	□ Food				
☐ Mosquito repellent	□ Water				
□ Matchsticks	□ Candles				
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