

**Operational Services**

**Exhibit - Annual School Safety Review**

Pursuant to the School Safety Drill Act (P.A. 94-600), the School Board or its designee conducted the annual review of each school building’s emergency and crisis response plans, protocols, and procedures and each building’s compliance with the school safety drill program, the details of which follow:

\_\_\_\_\_ District Superintendent \_\_\_\_\_

\_\_\_\_\_ District Schools \_\_\_\_\_

\_\_\_\_\_ Review Meeting Date \_\_\_\_\_ Review Meeting Time \_\_\_\_\_ Review Meeting Location \_\_\_\_\_

*Indicate who was invited (having been given a minimum of 30 days’ notice before the review’s date) to participate and who attended:*

**Notified**

**Participants in Attendance**

School Board members or Board’s designee:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Building Principal from each school:

_____	_____
_____	_____
_____	_____
_____	_____

Representatives from other appropriate educational organizations or associations:

_____	_____
_____	_____

**Notified**

**Participants in Attendance**

Representatives from all local first responder organizations:

Fire department(s):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Law enforcement department(s):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other emergency medical service(s):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other related organizations requesting participation:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Summary of recommended changes to the existing school safety and drill plans to be implemented:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Check all that apply:**

- An effective review of the emergency and crisis response plans, protocols, and procedures and the school safety drill programs of the District and each of its school buildings has occurred.
- The School District will implement the review's recommended changes listed above.
- This Annual School Safety Review was authorized by the School Board or its designee.

Completed by \_\_\_\_\_

Date \_\_\_\_\_

*Send a copy of this report to each party that participated in the annual review process and to the Regional Superintendent of Schools. If any of the participating parties have comments on this report, they may submit their comments in writing to the Regional Superintendent.*

Adopted: 12/13/05