

SCHOOL EMERGENCY MATERIALS SURVEY

Name of School & School District _____

Location (Physical Address) _____

City/State/Zip Code _____

Name of Principal _____

Principal's Phone No. _____ / Email address: _____

Please answer the following questions:

Our school has a NOAA Radio. _____ It is operational _____

The radio is located: _____

Our school subscribes to the i-Info notification program. _____

Our school currently has Shelter in Place Kits _____

If so, how many? _____

If the kits are incomplete, what items do you need to complete your existing kits.

Towel _____

Duct Tape _____

Masking Tape _____

Radio/Flashlight Combo _____

Water (at least 12 oz. bottle) _____

First Aid Kit _____

Do you have a kit in each classroom? If, not how many do you need to have in each classroom?

If you do have kits, do you have one in each classroom? _____ If not, how many do you need so you will have one in each classroom? _____

If you have no kits for your school, how many do you need so you will have one in each classroom? _____

Our school will schedule a safety presentation by the LEPC for staff, students, and parents. _____

Our school will ensure that the Shelter in Place Kits are not removed from the assigned classroom or school.

Our school will ensure that an inventory of Shelter in Place Kits is provided to the LEPC at the end of our school year. _____

Person preparing this application

Name: _____

Telephone No. _____

Email address _____

Questions:

David Cave, LEPC Chair

361-621-1567

LEPC@BeeCounty.Texas.Gov