

**NORTH SHORE SCHOOLS  
EMERGENCY PREPAREDNESS & PLANNING PROGRAM**

Dear Parents:

We are sending home two pages of important paperwork for you to complete and return as soon as possible:

- 1) the **Student Release** and
- 2) **Student Emergency Identification Forms.**

Please fill in each form completely as they are kept in different locations and are used for different purposes.

These forms are for school use only, in the event of an emergency or disaster, such as flood, fire, earthquake and the like. The contact person or alternate guardians are friends/families that live walking distance to the school, as bridges & roads may be closed or cluttered with debris.

On the back of the second sheet is a **Listing of Alternates** for you to keep for your personal reminder. You may want to keep a copy at home, at the office and in your car.

Note that we have made a few changes from last year:

- Signatures are no longer needed from your alternates.
- If you *do not* have a photo of your child – then do not worry or hold up this form. We will attach one after the school photographer comes. However, if you do have a photo, it would really help our volunteers process this paperwork quickly.
- Further instructions for each form can now be found on the back of each page – please read them prior to filling out the forms.

*Please inform the school if any of the information contained on these forms changes during the course of the school year. It is the parents' responsibility to ensure accurate and updated information is provided to the school.* Alternates should ensure that any changes in their information are passed on to the parents. You will be required to fill out new forms each September.

Thank you for your cooperation and assistance. Your promptness to fill out these forms and return to the school by the date requested, is much appreciated. This process helps to ensure a speedy reunion for you and your child(ren) and it contributes to the safety and well being of your child(ren) in an emergency situation.

**RETURN ALL GREEN FORMS BY FRIDAY, SEPTEMBER 24<sup>TH</sup>.**

(TEAR OFF)

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IF you are interested in volunteering or learning more about our School's Emergency Preparedness Plan, please fill out this portion and return it to the **school office.**

I would like to know more about \_\_\_\_\_

I am available to volunteer for the School's Emergency Preparedness Committee, please call me at: (phone #): \_\_\_\_\_ Parent's name: \_\_\_\_\_

Student's name: \_\_\_\_\_ Student's teacher: \_\_\_\_\_

## HOW TO BE PREPARED FOR AN EMERGENCY

In an ongoing effort to provide for our students' safety and well being, the school is expanding its effort in the area of emergency preparedness. Since we live in an earthquake prone area of B.C., the North Shore School Districts and municipalities use the earthquake scenario for emergency planning, because it covers other possible hazards such as fires, traffic disruption, evacuation, etc. *The school is prepared to care for your children* in the event of a critical situation, or if parents/alternates are unable to reach the school. However, we do ask for your help in the following areas:

- Complete and return the attached forms (Student Emergency Identification Form, Student Release Form – **KEEP** the Personal Alternates Record)
- Complete and update child's Comfort Kit
- Please do not phone the school following a disaster, we must have the lines open for outgoing emergency calls.
- TURN ON your battery operated radio or car radio to any available station for emergency information and directions.
- Following an earthquake or another emergency, when safe to do so (listen to radio for information), **WALK TO THE SCHOOL** to retrieve student(s) & bring your ID (i.e. driver's license). Please refrain from driving to the school. Street and access to the school may be cluttered with debris, the school access route and street entrances **must** remain clear for emergency vehicles.
- Before coming to the school, check your home first, to ensure it is safe to return to your home with children.
- **In a controlled release situation, (school or area surrounding school is unsafe to let students go on their own) students will *only* be released from the school to a previously authorized parent/guardian (as identified on *Student Emergency Identification and Student Release Forms*). This includes baby-sitters/daycares, grandparents, older siblings, relatives, neighbours or others.**
- Ensure permission is sought from the alternates and that they are aware of the school's emergency policies and procedures.
- All parents / alternates who come for your child(ren) must sign the students out, as per student release procedures, at a designated area.
- Alternates should live within walking distance to the school & be 19+ years old.
- Please familiarize yourself with the school's emergency preparedness plans and procedures.
- We recommend you participate in a Personal Emergency Preparedness Program/Course – no charge! For more information regarding courses, contact the North Shore Emergency Management Office @ 604 983-7440 or check their website [www.nsemo.org](http://www.nsemo.org)

One of the most important areas of school emergency planning is the gathering of accurate information so that the school is able to contact you or someone authorized to act on your behalf. The information on the two attached forms will be used **ONLY IN THE EVENT OF AN EMERGENCY OR DISASTER.**

*This information is kept confidential at the school.*

## Personal Alternates Record

### Please Keep This Record At Home or Office For Quick Access And Reference

In the event of an emergency/disaster, the school will only release students directly into the custody of the parents OR responsible individuals the parents have previously designated on the Student Release form. These individuals are referred to as the alternate who will care for the child(ren) and have been pre-authorized by the parents/guardians. Alternates must give their permission and understand that they must try to proceed to the school(s) and collect the students for whom they have accepted responsibility.

**SUGGESTION:** Choose family members and friends of your child's family. The more Alternates, the shorter time your child is likely to stay at the school. Alternates should live within walking distance of the school and be 19+ years old. If possible, list 2 household adults.

### Alternates Responsible For My Children:

Names	Addresses	*Phone Numbers

### I Have Consented To Be An Alternate For These Families:

Family Name	Child's First Name	Address	*Phone Number

\* If possible, add cell phone numbers

### REMEMBER:

- DO NOT PHONE** the school in an emergency/disaster. Listen to the radio for information.
- CHECK YOUR HOME 1<sup>st</sup>**, before going to the school, to ensure it is safe to return to with children.
- WALK, DO NOT DRIVE** to the school in the event of an earthquake. Streets must be kept open for emergency response vehicles.
- TAKE** personal identification (ID) when going to the school to pick up students.

**PLEASE KEEP (& COPY) THIS RECORD FOR HOME AND OFFICE USE AS QUICK REFERENCE**

## Student Emergency Identification Form

**PHOTO**

Teacher: \_\_\_\_\_

Grade: \_\_\_\_\_ Div: \_\_\_\_\_

Student Birthdate: \_\_\_\_\_

**Siblings in School:**

Name:	Teacher:

Family Name:

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Medical Alert (*use red dot*): \_\_\_\_\_

BC Health Card Number: \_\_\_\_\_ Doctor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

List any medical conditions, severe allergies, medication information or any instructions (continue on back if necessary)

Student Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

	Mother	Father
Name:		
Address:		
Home Phone Number:		
Work Phone Number:		
Cell Phone Number:		
Work Address:		
Days/Hours at Work:		

**\*ALTERNATE GUARDIAN** (Persons within walking distance of the school and 19+ years old)

\*Suggestion: If possible, list 2 household adults, for maximum number of persons to release your child to

Name	Signature	Phone Number*

**OUT OF PROVINCE CONTACT**

\*If possible, add cell phone numbers

Name	City & Prov/State	Area Code and Phone Number*

**I hereby authorize any of the above listed alternate guardians to pick up my child from school in the event of a controlled student release. I also authorize the school or persons caring for my child to use any of the above information, as necessary, in the event of an emergency.**

Signature (Mother): \_\_\_\_\_ Signature (Father): \_\_\_\_\_ Date (m/d/y): \_\_\_\_\_

## **STUDENT EMERGENCY IDENTIFICATION FORM**

This form will provide all of the essential information to the school and other caregivers. Please read the following guidelines BEFORE filling out these forms.

### **MEDICAL**

Please provide details on any critical medical care that your child may require (including any allergies e.g. nut, medication). Remember that it may not be possible to reach the usual medical facilities or your usual doctor, so any instructions you give will be valuable. If your child requires essential medication, *it is your responsibility* to make arrangements with the school.

### **PARENTS**

If there were an urgent need to contact you, first attempts to do so would be by telephone. If telephones are not available, your work address may be critical for alternate attempts to send you a message.

### **ALTERNATES**

These can be different people than those listed on other forms that may have been sent home, but should be the same on both the *Student Emergency Identification* and *Student Release Forms*. Designate, if possible, at least four alternates/families. If possible, list two household adults (Mr & Mrs). These are the **ONLY** people, other than the parents, who will be allowed to sign for the release of a student in an emergency. The alternates must be 19+ years old and should live within walking distance (long walk OK) to the school, as transportation disruption is a possibility. It is essential that you seek the consent of these alternates. Make them aware of their responsibilities and the school's procedures and **have them sign the *Student Emergency Identification* and *Student Release Forms***. Your child(ren) should be informed as to who can / cannot retrieve him/ her from school.

### **OUT OF PROVINCE CONTACTS**

Record an Out of Province telephone contact name and number, including area code. If normal telephone service is disrupted, the first possible calls may be long distance calls to out of areas, unaffected by the disaster. The contact number will be used if it is necessary to leave a message regarding your child's whereabouts or condition. This should be the same number used by the entire family so that news may also be relayed to the student.

More space if needed:

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## Student Release Form - Elementary

Student First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_ Div: \_\_\_\_\_

In the event of an emergency or disaster, such as an earthquake, the school may implement a controlled release of students for their safety and well-being. Should this be necessary, the school will only release your child to persons authorized on this form or, if necessary, to authorized medical personnel. Please complete the following information:

(Parent is responsible to inform school of any changes on this form throughout school year)

Legal Parent/Guardian	First Name	Family Name
Mother		
Father		

Family Name:

We/I authorize the release of the above child into the custody of the following persons should either parent be unable to reach the school.

(MUST be the same "Alternates" as listed on the *Student Emergency Identification Form*) (Designated alternates should live within walking distance of the school and be 19+ years old.)

*Alternate Guardian	Signature	PhoneNumber

\* If possible, list 2 household adults for maximum potential persons to pick up your child

\* **Remember** to include daycares, grandparents etc that normally pick up your child from school.

List any special instructions or individuals who MAY NOT claim this student:

I realize that in the event of a controlled student release, only the above authorized adults will be able to claim my child (medical or response personnel excepted). On release of my child, a record shall be kept of the name of their temporary guardian, time of release and expected destination.

Mother Signature: \_\_\_\_\_ Father Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### FOR SCHOOL USE ONLY (PLEASE PRINT CLEARLY)

Student Name: \_\_\_\_\_

Student Released To: \_\_\_\_\_

First Destination: \_\_\_\_\_

Final Destination: \_\_\_\_\_

Authorized by (staff): \_\_\_\_\_

Date & Time of Authorization: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Notes: \_\_\_\_\_

