

HUENEME ELEMENTARY SCHOOL DISTRICT  
205 NORTH VENTURA ROAD  
PORT HUENEME, CA  
93041 (805) 488-3588

## **PARENTS: KEEP FOR YOUR REFERENCE**

# **EMERGENCY EVACUATION INSTRUCTIONS**

By state law, the Board of Trustees is required to provide a plan of emergency evacuation for the welfare of students. Experience indicates the most satisfactory plan is one which includes planning and responsibility on the part of school personnel and planning and responsibility on the part of parents.

### **NATURAL CATASTROPHE**

Emergency situations include events involving floods or high tides, major earthquakes, falling aircraft, fire, epidemics, or other disruptions to the educational program. In such cases immediate decisions must be made by school personnel.

During any of the above emergencies, the school principal will determine whether the school should be evacuated. If this is necessary, the students move to a location on the playground or other designated area under the direction of their teachers.

School staff are required to perform their assigned duties until they are relieved or released by the school administrator in charge. Since students are safer on the school premises under the supervision of school staff during most emergencies, alternatives to supervised evacuation from the school site will be carefully considered. Evacuation of students from the school will be considered only when the occupation of the school site becomes untenable. The closing of a school and the supervised evacuation of students to an alternative site requires approval of the Superintendent. Under no circumstances will children be released from school without supervision in an emergency during school hours, or even after school hours if the principal determines the area(s) surrounding the school are hazardous. Students will only be released to their parents or to individuals that have been designated by the parents for emergency care. Students will not be released to anyone who is not on the Emergency Evacuation Form.

# EMERGENCY EVACUATION FORM

(RETAIN THIS TOP PORTION IN THE FAMILY FILE FOR FUTURE REFERENCE)

Persons we have identified for emergency care in case of school dispersal:

	Name of Adult	Address	Telephone #
1.	_____	_____	_____
2.	_____	_____	_____

Signature of Parent or Guardian: \_\_\_\_\_

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

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# EMERGENCY EVACUATION FORM

PLEASE RETURN THIS BOTTOM PAGE TO SCHOOL

Student's Name: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ Room # \_\_\_\_\_

Persons living within a reasonable distance of school who are designated by mother, father, or guardian for emergency care of child in case of dispersal:

	Name of Adult	Address	Telephone #
1.	_____	_____	_____
2.	_____	_____	_____

Signature of Parent or Guardian: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Work #

Cell #

Home #

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

**PLEASE RETURN THIS BOTTOM PAGE TO SCHOOL**