

**APPENDIX F**

**SCHOOL INCIDENT REPORT FORM**

Type of Incident: \_\_\_\_\_

Location: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m./p.m.

Person Reporting Incident: \_\_\_\_\_

Command Post Manned By: \_\_\_\_\_

Type of Response:	Sheltering	<b>YES</b>	<b>NO</b>	Early Dismissal	<b>YES</b>	<b>NO</b>
	Evacuation	<b>YES</b>	<b>NO</b>	School Cancellation	<b>YES</b>	<b>NO</b>

<b>NOTIFICATIONS:</b>	<b>PHONE #</b>	<b>YES</b>	<b>NO</b>	<b>TIME</b>
Superintendent	315-445-8304	_____	_____	_____
Business Administrator	315-445-8209	_____	_____	_____
Director of Transportation	315-445-8388	_____	_____	_____
Director of Facilities	315-445-8312	_____	_____	_____
Supervisor of Food Service	315-445-5286	_____	_____	_____
Principals				
Jamesville Elementary	315-445-8460	_____	_____	_____
Moses-DeWitt Elementary	315-445-8370	_____	_____	_____
Tecumseh Elementary	315-445-8320	_____	_____	_____
Jamesville-DeWitt Middle School	315-445-8360	_____	_____	_____
Jamesville-DeWitt High School	315-445-8340	_____	_____	_____
Fire Department	911	_____	_____	_____
Police (Local)	911	_____	_____	_____
Police (State)	911	_____	_____	_____
County Disaster Preparedness Director	315-435-2525	_____	_____	_____
Onondaga County Health Department	315-435-3233	_____	_____	_____
American Red Cross	315-234-2200	_____	_____	_____
Hospitals				
Upstate	315-464-5540	_____	_____	_____
Community General	315-492-5011	_____	_____	_____
St. Joseph's	315-448-5111	_____	_____	_____
Crouse Irving	315-470-7111	_____	_____	_____
Media		_____	_____	_____

SUPERINTENDENT: \_\_\_\_\_

Signature