

## **Shelter Preparation Form**

Unit:	Building:			
SECTION 1 - EMERGENCY CONTACTS				
UNIT SAFETY LIAISON Name (Last, First)	BUILDING COORDINATOR Name (Last, First)	NEAREST HOSPITAL Name		
Phone Number	Phone Number	Phone Number		
		Street Address	Street Address	
UNIVERSITY POLICE  Dial 911 from a University Phone or 703-993-2810 from a Cell or Off-Campus		City, State, Zip Code		
SECTION 2 - SHELTER AREA				
	Building		Room Number	
Shelter Area 1				
Shelter Area 2				
Shelter Area 3				
Shelter Area 4				
SECTION 3 - SAFETY SUPPLIES				
	Location 1	<b>Location 2</b>		
First Aid Kit				
Radio/NOAA Weather Radio				
Flashlight and Spare Batteries				
Non-Perishable Food				
<b>Bottled Water</b>				
Other:				
COMMENTS				
Completion Date: Review Date:				