

EMERGENCY PLAN

PERSONAL INFORMATION

Name: _____ **Phone:** _____

Address: _____

MAKE THE RIGHT CALL

Emergency Assistance for Life Threatening Emergencies or Crimes in Progress (Police, Fire, Ambulance)	ON-CAMPUS DIAL 4-4-4-4 from Campus Phone OR 613 - 520 - 4444 OFF-CAMPUS DIAL 9-1-1
Non-Emergency Assistance / Non-Urgent Reports / General Info (Police)	ON-CAMPUS 613 - 520 - 3612 OFF-CAMPUS 613 - 236 - 1222
On-Campus Maintenance	613 - 520 - 3668
City of Ottawa	DIAL 3-1-1 613 - 580 - 2400 (Local Number) 1 - 866 - 261 - 9799 (Toll Free) 613 - 580 - 2401 (TTY Service)

EMERGENCY CONTACTS

Name: _____ **Phone:** _____

Address: _____

Name: _____ **Phone:** _____

Address: _____

Name: _____ **Phone:** _____

Address: _____

EMERGENCY NUMBERS

HOSPITAL: _____ Phone: _____

FAMILY DOCTOR: _____ Phone: _____

INSURANCE: _____ Phone: _____

OTHER: _____ Phone: _____

OTHER: _____ Phone: _____

OTHER: _____ Phone: _____

MEETING LOCATION

MEETING LOCATION: _____

ALTERNATE MEETING LOCATION #1: _____

ALTERNATE MEETING LOCATION #2: _____

WORK INFORMATION

Company: _____ Phone: _____

Address: _____

Evacuation Location: _____

Company: _____ Phone: _____

Address: _____

Evacuation Location: _____

SCHOOL INFORMATION

School: _____ Phone: _____

Address: _____

Evacuation Location: _____

Children Attending: _____

School: _____ Phone: _____

Address: _____

Evacuation Location: _____

Children Attending: _____

FAMILY MEMBER INFORMATION

Name: _____ Date of Birth: _____

Important Medical Info or Special Needs: _____

Name: _____ Date of Birth: _____

Important Medical Info or Special Needs: _____

Name: _____ Date of Birth: _____

Important Medical Info or Special Needs: _____

Name: _____ Date of Birth: _____

Important Medical Info or Special Needs: _____

OTHER RELEVANT INFORMATION

EMERGENCY PLAN AND KIT INFORMATION

Location of Emergency Kit: _____

Emergency Kit Last Checked / Replaced Date: _____

Plan Last Updated: _____

Planned Date of Next Update: _____