**Policy:**  Emergency phone numbers, including 911, fire, police, and the poison control center, and the facility’s physical address and 2 main cross streets, must be conspicuously posted in a place visible to staff.

**Procedure:** This **fillable** form must be completed in its entirety and posted adjacent to a telephone in the classroom.

|  |
| --- |
| **CLASSROOM INFORMATION** |
| Phone Number  | Address  | List 2 Main Cross Streets  |
| **GREEN GRAB and GO BINDER** | **EMERGENCY PREPAREDNESS KIT** |
| Location  | Location  |
| **FIRST AID KIT(S)** |
| Inside  | Outside  |
| **COUNTY EMERGENCY MANAGEMENT COORDINATOR** |
| Name  | Phone Number  | Address  |
| **LOCAL HEALTH DEPARTMENT** |
| Contact Name  | Phone Number  | Address  |
| **LOCAL AMBULANCE** |
| Emergency Number**911** | Non-Emergency Number  | Address  |
| **LOCAL HOSPITAL** |
| Phone Number  | Address  |
| **POISON CONTROL CENTER** |
| Phone Number: **1-800-222-2122** |
| **LOCAL FIRE** |
| Emergency Number**911** | Non-Emergency Number  | Chief  | Address  |
| **LOCAL POLICE** |
| Emergency Number**911** | Non-Emergency Number  | Sheriff  | Address  |
| **SCHOOL LIAISON OFFICER (if applicable)** |
| Name  | Phone Number  | Email  | Address  |
| Additional Information to Note  |
| **COORDINATOR/SUPERVISOR** |
| Name  | Phone Number  | Email  | Address  |
| **EDUCATION COACH** |
| Name  | Phone Number  | Email  | Address  |
| **LICENSING CONSULTANT** |
| Name  | Phone Number  | Email  | Fax  |

In case of an emergency and supervisors are not available contact:

* Early Childhood Director: Shannon Phelps 989.302.2812
* Director of Operations: Kim Aultman 231.346.2114
* Executive Director: Kerry Baughman 231.346.2161

**Original:** This is a fillable form. Post near a telephone in a conspicuous location that is visible to staff. **Copy** to Supervisor.

Reference: Licensing R400.8164 (3)