**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)