

SHELTER REPORT & EVALUATION FORM

Instructions: Complete this form and forward to Environmental Health and Safety Department and a copy to the Director of the Facility.

Location:	Date Shelter Taken:
Time Shelter Announcement Made:	Time All Clear Announced:
Why was shelter necessary?	Name of Person Completing this Form:
List names of persons injured and type of injury, if known:	
List estimated damages by type and cost, in known.	
What could be done to improve our emergency procedures regarding taking shelter?	

1. EVACUATION PROCESS:

What method of notification was used to start evacuation process?	___ Primary Alarm	___ PA System	___ Human Messenger	___ Other: Define Manual alarm and physical announcement since everyone was in the parking lot
What area(s) went to shelter?				
Where there any problems as they took shelter ? If so, be specific.				
Who made the decision to take shelter?			How long did it take to take shelter?	

2. EMERGENCY RESPONSE:

What emergency response groups were called to help?	Who met them?
List names of other Emergency Response Personnel involved:	
What problems were encountered with Emergency Response Personnel or Agencies?	

3. EQUIPMENT:

Were items from the first aid kits used?	Were used items replaced?
Were the flashlights used?	Were used flashlights returned to areas for future use?
List other emergency equipment used?	
Was other emergency equipment returned to area for future use?	