Safety Plan

Student Name:_____ Grade:_____

School:_____

The student recognized the following as warning signs for at-risk behavior:

The student agreed to do the following if the warning signs for at-risk behavior present:

The student identified these adults as stable social supports he/she will contact in the event of a crisis:

The student was given or already has the following crisis/professional support contacts:

The student identified the following reasons for following the safety plan:

The student rated his/her level of confidence in following the safety plan as a _____ out of 10. (ten being the most confident)

SFRD/School Signature

Student Signature

A copy of this plan was given to the school and parent

Follow-up notes:

Dale

Date

Parent Signature