Emergency Response Manual -*School Emergency Response Team* E. R. 2

School Number
School Name Education Centre
Principal 0
Date Submitted

***COMPLETE YELLOW SECTIONS**

Principal Signature

Name	Position	Room#	Grade	Ext	Cell#	Home#

Upon Completion of this Renewal Update Report please print and have Principal Signature

* Please return original to the Superintendent responsible for Emergency Preparedness by October of each year and please send a copy to your appropriate Superintendent.

Thank you for your assistance in completing and maintaining these manuals

Revised March 2009