

Foster Home Emergency Preparedness Plan

General Information

Foster Parent Name(s):

Address:

Phone Number:

Child(ren) Name(s):

Caseworker Name & Phone:

Emergency Contacts

Primary Emergency Contact:

Secondary Emergency Contact:

Hospital/Clinic Name & Phone:

Evacuation Plan

Evacuation Location:

Evacuation Route:

Transportation Plan:

Meeting Points

Inside Meeting Point:

Outside Meeting Point:

Communication Plan

How will family members contact each other?

Medical Needs

Medications/Allergies/Special Needs:

Utilities Shut-off Instructions

Instructions/Location (Gas/Electric/Water):

Emergency Supplies Location

Where are the emergency supplies kept?

Notes