

DATA SPECIFIC to the \_\_\_\_\_ School, Brockton, MA  
(as of school year \_\_\_\_\_)

**A. In-School CMT members**

#	Member	Home Phone	Location during school day
1			
2			
3			
4			

**B. Principal:** \_\_\_\_\_ Home Phone: \_\_\_\_\_

**C. Assistant Principal:** \_\_\_\_\_ Home Phone: \_\_\_\_\_

**D. Staff Telephone Tree** is located \_\_\_\_\_

**E. ISCMT (In-School Crisis Management Team)** will report to \_\_\_\_\_; alternate location \_\_\_\_\_

**F. Student emergency contact forms** are located \_\_\_\_\_

**G. Bus List** is located \_\_\_\_\_  
**Class lists** are located \_\_\_\_\_

**H. Medical Awareness List for students** is located \_\_\_\_\_

**I. CPR trained staff:** see attached list

**J. Assignments:**

**Rumor Control Person** \_\_\_\_\_  
**Spokesperson** \_\_\_\_\_  
**Parent Support Person** \_\_\_\_\_  
**Staff/Student Support Person** \_\_\_\_\_  
**Debriefing Coaches** \_\_\_\_\_ / \_\_\_\_\_