|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **District Name:** | | | | |
| **1** | Are there security guards at your schools daily?  **If no**, describe the frequency. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | Yes  No |
| **2** | Indicate the number of personnel providing security services: | | | |
| Employed: | Unarmed Security: | Armed Security: | |
| Contracted: | Unarmed Security: | Armed Security: | |
| **3** | Does the district use a third party for security? If so, which type:  Public, Local Law Enforcement Agency  Private Security Firm | | | Yes  No |
| **4** | When security is contracted to a third party, is the contractor’s general liability / law enforcement professional liability policy required to name the district as an additional insured?  **If yes**, does the third party maintain a minimum limit of liability coverage and indemnify the district?  **If yes**, indicate the minimum limit of liability of general / policy professional liability coverage your district requires: | | | Yes  No  Yes  No  $  (Per occurrence)  $  (Per aggregate) |
| **5** | Do security personnel have arresting authority? | | | Yes  No |
| **6** | If there is employed armed security, are they trained and/or re-certified annually to the standards required for public sector law enforcement for use of weapons? | | | Yes  No |
| **7** | Are criminal background checks and psychological reviews provided for all employed security and armed staff?  **If yes**, how often are these checks and reviews completed?  **If no**, explain? | | | Yes  No        Months |
| **8** | Do security personnel store weapons on premises? | | | Yes  No |
| **9** | Do any other faculty, staff, or employees carry or store weapons on premises?  **If yes**, please provide copy of Weapons Policy.  Number of armed administrators: ­­­­­­­­­­­­­­­­­­­­­­­­  Number of armed teachers: ­­­­­­­­­­­­­­­­­­­­­ | | | Yes  No |
| **10** | Does the district have emergency call boxes located throughout the campus that are connected directly to campus security or police? | | | Yes  No |
| **11** | Does the district conduct annual table-top drills with local law enforcement and/or first responders? | | | Yes  No |
| **12** | Does the district utilize available school mapping programs? | | | Yes  No |
| **13** | Are there procedures in place to make sure that appropriate contact information is updated annually and shared with law enforcement and first responders? | | | Yes  No |
| **14** | Has the district completed a safety analysis (CPTED or other) to survey the school facilities from an external threat, active-shooter, or other perspective? | | | Yes  No |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:  Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |