

# Student Safety Plan Template

## Purpose:

This template provides a structured approach for developing a **Student Safety Plan** when a student has exhibited **threatening, aggressive, or high-risk behavior**. It ensures collaboration between **school staff, parents, mental health professionals, and law enforcement** to support the student while maintaining safety for all.

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## 1. Student Information

- **Student Name:**

\_\_\_\_\_

- **Date of Birth:** \_\_\_\_\_

- **Grade Level:** \_\_\_\_\_

- **School:** \_\_\_\_\_

- **Date of Plan Development:** \_\_\_\_\_

- **Plan Developed By:** \_\_\_\_\_
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## 2. Identified Concerns & Risk Assessment

- **Behavioral Concerns:** (Check all that apply)

Verbal threats

Physical aggression

Self-harm/suicidal ideation

Possession of a weapon

Social withdrawal/isolation

Online threats or concerning posts

Other: \_\_\_\_\_

- **Threat Level Classification (Based on Assessment):**

Low Risk (Requires monitoring & support)

Moderate Risk (Intervention required)

High Risk (Immediate safety measures needed)



**Reference:** Behavioral Threat Assessment Team (BTAT) Risk Matrix.

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## Student Safety Plan Template

### 3. Safety Plan Components

#### A. Supervision & Monitoring

- Increased staff supervision during:  Class  Lunch  Hallway transitions  Other:
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- Regular check-ins with:  Counselor  Teacher  Administrator  Other: \_\_\_\_\_

- Daily/weekly behavioral review meetings with student.

#### B. Behavior Expectations & Supports

- Student will:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

- Support provided:  Counseling  Conflict resolution  Academic adjustments

#### C. Parental/Guardian Involvement

- Parent/Guardian notified on: \_\_\_\_\_

- Parent/Guardian agrees to:

Reinforce behavior expectations at home

Attend safety meetings

Seek additional support (mental health services, family counseling)

 **Handout:** Parent Collaboration Guidelines for Student Safety Plans.

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### 4. Crisis Intervention & Emergency Procedures

- If the student escalates, staff should:

1. **Immediately notify:**  School Administrator  School Resource Officer  Counselor
2. **Remove student from:**  Classroom  Common areas  School grounds (if required)
3. **Contact emergency services if needed:**  911  Mental health crisis team

**Evacuation or lockdown measures** may be implemented if the situation poses a school-wide threat.

## Student Safety Plan Template

 **Reference:** School Crisis Response Plan.

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### 5. Review & Follow-Up

- Safety plan will be reviewed:  Weekly  Bi-weekly  Monthly  As needed
- Assigned staff responsible for review: \_\_\_\_\_
- Plan modifications will be made if:  Student progress noted  Increased risk observed

**Final Notes:** \_\_\_\_\_

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### Signatures & Approval

**Student:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_

**Administrator:** \_\_\_\_\_

**Counselor/Social Worker:** \_\_\_\_\_

**Date:** \_\_\_\_\_

This plan is designed to **ensure the safety of all students and staff** while providing **appropriate interventions** to support the identified student. All involved parties must adhere to the outlined procedures and responsibilities.