

# SAFETY PLAN



Date:
What are my warning signs that a crisis may be developing?
What are some ways I can help myself at school?

Who are people I can call if I need help?	
Name:	Phone #:
Name:	Phone #:
Name:	Phone #:

Who will I contact in case of an emergency:
Call 911 or 988
National Suicide Prevention Lifeline: 988
Local Hospital _____

