

Mandatory Notification Regarding Active Threat Exercise

Note to administrator: At least two weeks prior to any active threat exercise, this notice must be provided to any individual impacted by the exercise, including each student and staff member expected to participate in the exercise, the parent or guardian of any student who is expected to participate, and any other individual participating in the exercise.

In addition, this notice must be posted at least two weeks prior through multiple distribution networks, including, but not limited to, the District's website and social media platforms.

The District must also notify first responder organizations that would likely respond in the event of a false report or alarm and create a safe zone around the area in which the exercise will be conducted to keep out actual firearms, ammunition, and other weapons, other than those carried by authorized individuals and law enforcement.

_____ (date)

Dear parent or guardian, student, staff, participants, and anyone who may be impacted by the exercise below:

As required by state law, _____ School District hereby notifies you of the planned active threat exercise described below. An active threat exercise is defined as any exercise that includes a simulated active aggressor or an active shooter simulation. This exercise is intended to prepare students and staff for proper responses to a potential unforeseen active threat.

This [*will OR will not*] be a live simulation that mimics or appears to be an actual shooting incident.

Subject of planned exercise or simulation: _____

Date of planned exercise or simulation: _____

Alternative date for planned exercise or simulation due to unforeseen circumstances, such as weather: _____

Location of planned exercise or simulation
(for example, campus/building or District area): _____

Approximate time of day and/or duration of planned exercise or simulation
(for example, 10 a.m. for one hour): _____

Brief description of planned exercise or simulation (describe content, form, and tone of exercise): _____

[Insert any information that may be helpful to parents, students, staff, any individual participating, any individual impacted, or the general public, such as modified traffic

San Felipe Del Rio CISD
233901

SAFETY PROGRAM/RISK MANAGEMENT
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(EXHIBIT)

patterns, street closures, additional presence of law enforcement, parental notifications by email or text message when the exercise begins and ends, and the like.]

If you have any questions regarding this notice, please call _____
(position title) at _____ (phone number).