## SAFETY PROGRAM/RISK MANAGEMENT ACCIDENT PREVENTION AND REPORTS

CKB (EXHIBIT)

**Note to administrator:** At least two weeks prior to any active threat exercise, a 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.

If a student participates in the exercise, which is discouraged, the student must be in grade 9 or higher and may only participate if it provides the student with an educational benefit and is completed in accordance with law. The student must opt in to the exercise and must have written permission from the parent or guardian to opt in.

A notice must be provided to parents in the parents' native language to the greatest extent practicable. In addition, a 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)	
As required by state law, San Felipe Del Rio CISD hereby notifies you of the planned active hreat 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 inended to prepare students and staff for proper responses to a potential unforeseen active hreat.	
This <i>(choose ONE:</i> will <i>OR</i> will not) be a live ual shooting incident.	ve simulation that mimics or appears to be an ac-
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:	
_ocation 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, 10:00 a.m. for one hour):	
Brief description of planned exercise or simulation (describe content, form, and cone of exercise):	

DATE ISSUED: 7/10/2024

**UPDATE 69** 

CKB(EXHIBIT)-RRM

SAN FELIPE DEL RIO CISD 233901

## SAFETY PROGRAM/RISK MANAGEMENT ACCIDENT PREVENTION AND REPORTS

CKB (EXHIBIT)

[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 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	
(insert position title) at	(insert phone number).

DATE ISSUED: 7/10/2024

**UPDATE 69** 

CKB(EXHIBIT)-RRM