

**NPSB Pupil Appraisal Services**  
**EMERGENCY ACTION PLAN**

**NAME:**

**DATE:**

**SCHOOL:**

**INTERVENTION/PREVENTION PLAN:**

Close supervision at all times on school grounds or during school sponsored activities (field trips, ball games, etc.).

Seating will be arranged in the front seat of the bus and alone if possible.

A behavior intervention plan will be implemented to address inappropriate behaviors.

School Counselor will provide support to address appropriate personal boundaries, social skills, grief, and other issues deemed appropriate by the counselor.

Appropriate disciplinary actions or notification of child protection/law enforcement will be implemented to address any behavioral infractions.

The undersigned agree to the implementation of the above plan:

\_\_\_\_\_

Student

\_\_\_\_\_

Principal/ODR

\_\_\_\_\_

Parent/Guardian

\_\_\_\_\_

Regular Education Teacher

\_\_\_\_\_

Special Education Teacher

\_\_\_\_\_

Bus Driver