



## School Emergency Management Team Contact Information

**School Name:**

Position	Name	Admin./Cert./Class.	Office Phone	Cell Phone	FEMA Courses Completed?	Access to EMP?	Work Email
Incident Commander							
<i>Alternate</i>							
Public Information Officer							
<i>Alternate</i>							
Operations: First Aid							
<i>Alternate</i>							
Operations: Maintenance/Custodian							
<i>Alternate</i>							
Operations: Security							
<i>Alternate</i>							
Operations: Evacuation Coordinator							
<i>Alternate</i>							
Operations: Reunification Coordinator							
<i>Alternate</i>							
Operations: Counselor							
<i>Alternate</i>							
Operations: Technology Coordinator							
<i>Alternate</i>							
Operations: Food Service Manager							
<i>Alternate</i>							