Domestic Programs

Faculty Emergency Plan

**Program Name:**

**Director:**

**Program Dates:**

Faculty directors are responsible for filling out all sections of the form.

If you have questions, please consult your point person for guidance.

Include program itinerary and student addresses when submitting form (see Section 5).

Share all information with additional program staff and students, as appropriate.

**Section 1: Basic program contact information**

**Director Contact Information**   
  
**Director cell phone number on-site:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact information prior to program start (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact information during student transit (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact information after program end (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Director address on-site:**

Accommodation address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On-site phone (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address(if different)**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other on-site contact**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Affiliation with program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Residence phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 2: Emergency Action Plans**.

Please consider the situations below and describe how each incident would be handled.

1. Director learns s/he is unable to travel with the group before the start of the program. Is there another person who would replace the director (please identify)?
2. If not, what contingency is in place to deal with this?
3. Director is incapacitated during program operation.
   * Who will manage the program?
   * Who will stay with the director?
4. Please share specifics of how the program will be managed during the director’s incapacitation (e.g., finances, course instruction, transportation).
5. Both Director and Assistant Director/Program Assistant are incapacitated (if applicable). Who will manage the program?
6. A student(s) is/are incapacitated. Who will stay with the student(s) in the event they are hospitalized or otherwise unable to travel with the rest of the group?

**Section 3: Additional Emergency Contacts**.

Add contact information for persons listed in section 2 and other person(s) who would have responsibility or be of assistance during an emergency.

**Name:**

**Capacity:**

**Cellphone:**

**Email:**

**Physical Address**:

**Mailing Address (if different):**

**Name:**

**Capacity:**

**Cellphone:**

**Email:**

**Physical Address**:

**Mailing Address (if different):**

**Name:**

**Capacity:**

**Cellphone:**

**Email:**

**Physical Address**:

**Mailing Address (if different):**

**Section 4: Other on-site resources**:  
**Urgent Care, Hospital w/ER, or Doctor’s Clinics (list 1-2):**

**COVID-19 Test Site (list type of tests available):**

**Local Police Department(s):**

**Travel Agent (if applicable):**

**Local Fire Department(s):**

**Identify two meeting places in the event of an emergency (per overnight site):**

**Section 5: Program Itinerary, Student Cell Numbers, and On-Site Addresses**

1. Provide a **complete** day-by-day itinerary for program activities covering all program dates.
2. Include a list of student’s cell phone numbers and on-site address (if different from program director’s)

**Section 6: Communication Plan**

Please outline the following. Ensure that this plan and information is communicated to all program staff and participants prior to travel.

* Who is primary contact for students while onsite?
* When/how often this will the primary contact reach out to students?
* When can students reach the primary contact?
* How do they prefer to me reached?
* Whom should students contact if primary contact is not available?
* How will you share general information with students during the program?
* How will you share urgent information with students during the program? (Note: Indicate at least 2)
* Define expected student availability or response.
  + *Test this plan at least once upon arrival. For programs longer than 4 weeks, plan for additional tests of communication plan.*