

Sample Risk and Hazard Vulnerability Assessment

This Risk and Hazard Vulnerability Assessment will assist school districts/schools to plan in ways that compliment the All Hazards planning done by the community. It is important that School District/School All Hazard Plans integrate well with municipal emergency management plans.

Assessment Instructions: This rating of hazards should be done by the School District's/School's Safety Committee. **This Risk and Hazard Vulnerability Assessment is not intended to be completed by one person working alone.** A copy of your Municipal and County Hazard Vulnerability Analysis may be requested from your Municipal and County EMA Offices.

1. Fill out the Jurisdiction Description/Planning Team form.
2. Go to the Hazard Identification and Rating section.
3. Fill out the Rating Chart:
 - Begin with the first hazard. If you answer “YES”, the hazard could affect your jurisdiction, continue answering questions 2, 3, 4, and 5 in that row.
 - If your answer is “NO” to question 1, continue down the page to the next hazard.

NOTE: Risk and Hazard Vulnerability Assessments must be reviewed at least once every year for new risks and changing conditions—such as new construction—in the area.

If you have answered “yes” to either question #3 or #4, *you have identified a significant hazard for your school district/school.*

4. Make a copy of the completed Risk and Hazard Vulnerability Assessment:
 - Send a copy to your superintendent’s office
 - Your Municipal and County Emergency Management Agency should get a copy.
5. Write or update the School District’s/School’s Hazard Identification List.
6. Write or update the School District’s/School’s All Hazard Plan.

Jurisdiction Description

1. Jurisdiction name: _____
2. Name, address, and telephone number of Municipal Emergency Management Agency:
 - _____
 - Organization Name
 - _____
 - Street Address
 - _____
 - Mailing Address
 - _____
 - City State Zip Code
 - (____) _____ (____) _____
 - Telephone Number Fax Number
 - _____
 - E-Mail Address
3. Name, address, and telephone number of County Emergency Management Agency:
 - _____
 - Organization Name
 - _____
 - Street Address
 - _____
 - Mailing Address
 - _____
 - City State Zip Code
 - (____) _____ (____) _____
 - Telephone Number Fax Number
 - _____
 - E-Mail Address

4. Name, title, and telephone number of person responsible for coordinating School District/School All Hazard Planning activities:

Name

Title

Organization Name

Street Address

Mailing Address

City State Zip Code

(____) (____)
Telephone Number Fax Number

(____)
Residential Telephone Number

(____)
Work Telephone Number

(____)
Fax Number

E-Mail Address

SIGNATORY PAGE

5. Names and titles of members of the School District/School Safety Committee filling out this report:

Name	Title	Date
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Name	Title	Date
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Name	Title	Date
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Name	Title	Date
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Name	Title	Date
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Name	Title	Date
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HAZARD NAME	HAZARD IDENTIFICATION	VULNERABILITY			CONCLUSION
<p>NOTE: All Hazards marked by an asterisk (*) could be caused by a terrorist event.</p>	<p>1. Could this hazard affect _____ School District/School? If “NO” go down to next hazard. If “YES” complete #2-5</p>	<p>2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School?</p>	<p>3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?</p>	<p>4. Could any person be killed or injured if this event occurred?</p>	<p>5. If you answered “YES” to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.</p>
<p>ACCIDENT</p>	<p>Mass Transportation - An event involving a multi-passenger vehicle(s), such as cars, buses, school buses, planes, trains, ferries, or boats that occurs while traveling to or from a school district/school supported or sanctioned activity.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

	<p>Off Site - An incident from any cause that results in serious bodily harm or death to one or more people while engaged in a _____ School District/School supported or sanctioned activity off school property.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>On Site - An event from any cause that results in serious bodily harm or death to one or more people while on _____ School District/School property</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

HAZARD NAME	HAZARD IDENTIFICATION	VULNERABILITY			CONCLUSION
<p>NOTE: All Hazards marked by an asterisk (*) could be caused by a terrorist event.</p>	<p>1. Could this hazard affect _____ School District/School? If "NO" go down to next hazard. If "YES" complete #2-5</p>	<p>2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School?</p>	<p>3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?</p>	<p>4. Could any person be killed or injured if this event occurred?</p>	<p>5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.</p>
<p>AVALANCHE* - Mass of sliding snow occurs in mountainous terrain where snow is deposited on slopes of 20 degrees or more.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>BLIGHT/ INFESTATION* - Any injury to plants resulting in withering, cessation of growth and death of the above ground part of plants caused by: disease organisms (fungi, bacteria, or virus), insects, or unfavorable environmental conditions. Trees may be weakened causing risk to those passing under them. Fire risk due to dying vegetation may increase.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>BUILDING COLLAPSE Loss of structural integrity of buildings due to wind, water, snow or seismic events resulting in significant personal injury or economic loss.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

HAZARD NAME	HAZARD IDENTIFICATION	VULNERABILITY			CONCLUSION
		2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School?	3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	
<p>NOTE: All Hazards marked by an asterisk (*) could be caused by a terrorist event.</p>	<p>1. Could this hazard affect _____ School District/School? If "NO" go down to next hazard. If "YES" complete #2-5</p>				<p>5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.</p>
<p>CIVIL/POLITICAL DISORDER* - Certain types of facilities, such as government buildings, schools and universities, military bases, nuclear power facilities, abortion clinics, work sites, mass-gathering places, and correctional facilities are more vulnerable than others.</p>	<p>Demonstration</p> <p>A public protest.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

	<p>Economic Emergency</p> <p>Loss of personal, governmental, or commercial economic stability.</p> <p>[] Yes [] No</p>	<p>[] Low [] Moderate [] High</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>
	<p>Hostage Incident</p> <p>Person or group held as security pending the fulfillment of certain terms.</p> <p>[] Yes [] No</p>	<p>[] Low [] Moderate [] High</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>

HAZARD NAME NOTE: All Hazards marked by an asterisk (*) could be caused by a terrorist event.	HAZARD IDENTIFICATION	VULNERABILITY			CONCLUSION
	1. Could this hazard affect _____ School district/School? If "NO" go down to next hazard. If "YES" complete #2-5	2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School ?	3. Could _____ School District/School property damage, or loss of use of _____ School district/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.
CIVIL/POLITICAL DISORDER* (cont) Certain types of facilities, such as government buildings, schools and universities, military bases, nuclear power facilities, abortion clinics, work sites, mass-gathering places, and correctional facilities are more vulnerable than others.	Strike/Lockout A work stoppage to protest or influence work practices. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

	<p>Sabotage/Vandalism</p> <p>Intentional destruction of property or obstruction of normal operations.</p> <p>[] Yes [] No</p>	<p>[] Low [] Moderate [] High</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>
	<p>Weapons of Mass Destruction</p> <p>Chemical Biological Radiological Nuclear Explosive</p> <p>[] Yes [] No</p>	<p>[] Low [] Moderate [] High</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>	<p>[] Yes [] No</p>

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	1. Could this hazard affect _____ School district/School? If "NO" go down to next hazard. If "YES" complete #2-5	2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School ?	3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.
CONTAMINATION OF FOOD/DRINKING WATER/AIR/SOIL* - The accidental or deliberate introduction of dangerous substances into food, beverages, medications, water, and other ingested products or into HVAC systems.	[] Yes [] No	[] Low [] Moderate [] High	[] Yes [] No	[] Yes [] No	[] Yes [] No
CONTAGIOUS, INFECTIOUS DISEASE OR PANDEMIC*	[] Yes [] No	[] Low [] Moderate [] High	[] Yes [] No	[] Yes [] No	[] Yes [] No

<p>DAM FAILURE* - Dam failure is the spontaneous release of water resulting from improper operation or structural collapse of the structure, etc.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>DEATH/SUICIDE - The accidental or self inflicted death of a student, teacher, school volunteer, coach, school resource officer, school administrator; or any person that has frequent and close association with school district/school activities, staff and students. Morale for the whole school district/school and student grades can be affected for months afterward.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

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	1. Could this hazard affect _____ School District/School? If "NO" go down to next hazard. If "YES" complete #2-5	2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School?	3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.
DROUGHT - Prolonged period without rain: A twelve month period during which precipitation is less than 85% of normal as defined by the National Weather Service (44 inches is the average precipitation level per year). Droughts occur about every 20 years with severe three-five year droughts occurring about every 40 years.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p>EARTHQUAKE - Sudden motion of the ground which may result in surface faulting (ground rupture), ground shaking, and ground failure resulting in damage to buildings, roads, bridges and loss of utility service(s).</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>ENERGY SHORTAGE - A significant shortage of any energy resource or the inability to pay for high priced energy resources, resulting in a loss of fuel supplies for space heating, emergency and health care service; thereby endangering both life and property.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

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	1. Could this hazard affect _____ School District/School? If "NO" go down to next hazard. If "YES" complete #2-5	2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School ?	3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.
EROSION - The wearing away and removal of soil particles by running water, waves, currents, moving ice, or wind resulting in severe land destruction and property damage.	[] Yes [] No	[] Low [] Moderate [] High	[] Yes [] No	[] Yes [] No	[] Yes [] No
FIRE - The outbreak of fire or smoke within the school building, Porta-mobile units, and out buildings or in grass, fields, brush and woods around school buildings.	[] Yes [] No	[] Low [] Moderate [] High	[] Yes [] No	[] Yes [] No	[] Yes [] No

FLOOD	Riverine - Periodic over- bank flow of rivers and streams. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Flash - Quickly rising small streams after heavy rains, ice jams, or rapid snow melt. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
HEAT WAVE - A spell of three or more consecutive days on each of which the maximum temperature reaches or exceeds 90°F.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

HAZARDOUS MATERIALS INCIDENT - FIXED FACILITY*	Chemical Uncontrolled release of hazardous materials from a fixed site. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

	<p>Radiological - A radiological release occurring at a nuclear power plant, or in association with hospitals, industrial facilities, and research labs which may cause impaired thyroid function, whole body, and bone marrow contamination from absorption or ingestion of contaminated food.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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HAZARD NAME NOTE: All Hazards marked by an asterisk (*) could be caused by a terrorist event.	HAZARD IDENTIFICATION	VULNERABILITY			CONCLUSION
	1. Could this hazard affect _____ School District/School? If "NO" go down to next hazard. If "YES" complete #2-5	2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School?	3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.
HAZARDOUS MATERIALS INCIDENT - TRANSPORTATION* - Uncontrolled release of radiological, chemical, or biological hazardous materials during transport that causes impact to school district/school property or staff and students, or disrupts school transportation routes.	Rail <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Pipeline <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Port <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

	River <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Highway <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

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	1. Could this hazard affect _____ School District/School? If "NO" go down to next hazard. If "YES" complete #2-5	2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School ?	3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.
HURRICANE - A hurricane is a tropical cyclone in which winds reach speeds of seventy-four miles per hour or more, and blow in a large spiral around a relatively calm center. It produces measurable damage and destruction from heavy rainfalls, winds, and flooding.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
LANDSLIDE* - A mass of sliding earth, mud, or rock.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p>SUBSIDENCE - Depressions, cracks, and sinkholes in the ground's surface caused by removal of water or gas beneath the surface.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>TORNADO - A violently whirling column of air extending downward from a cumulonimbus cloud and seen as a rapidly rotating, slender, funnel shaped cloud that has a wind velocity of up to 300 miles per hour at the central core and destroys everything along its narrow ground path.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>TRANSPORTATION INCIDENT - PASSENGER - An incident involving passenger air, rail, highway, or water modes of travel resulting in death or injury. Includes school district/school staff and students traveling on school district/school buses, commercial buses, trains, cruise ships, ferries etc.</p>	<p>Air</p> <p>An accident involving a multi-passenger (twenty or more) or cargo aircraft or small private plane, resulting in injuries, loss of life, and destruction of private property where it impacts. Includes areas within the flight paths of airports.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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		2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ School District/School?	3. Could _____ School District/School property damage, or loss of use of _____ School District/School property result if this event occurred?	4. Could any person be killed or injured if this event occurred?	5. If you answered "YES" to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.
TRANSPORTATION INCIDENT - PASSENGER (cont) - An incident involving passenger air, rail, highway, or water modes of travel resulting in death or injury. Includes school district/school staff and students traveling on school district/school buses, commercial buses, trains, cruise ships, ferries etc.	Highway An unforeseen event involving a rapid-transit, multi-passenger vehicle or a large supply truck which results in severe injuries, fatalities, and property damage. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

	<p>Rail</p> <p>An accident or derailment involving multiple railroad cars which causes abnormal interaction with the general public by blocking roads and/or causing property damage.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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<p>TRANSPORTATION INCIDENT - PASSENGER (cont) - An incident involving passenger air, rail, highway, or water modes of travel resulting in death or injury. Includes school district/school buses, commercial buses, trains, cruise ships, ferries etc.</p>	<p>Water</p> <p>An accident involving a multi-passenger vessel, either public or private, resulting in injuries, loss of life, and destruction of property and requiring response and rescue by boat.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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<p>UNCONTROLLED ANIMAL/INSECT - A domestic or wild animal out of control that exhibits threatening behavior, or inflicts injury or death upon students/staff, or visitors. This includes bee and wasp attacks.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>URBAN FIRE - Uncontrolled burning in residential, commercial, industrial, or other properties in developed areas. An event of such magnitude as to cause serious injuries and deaths and impose severe economic losses to the community. Other structures in the vicinity of the fire may be affected in a variety of ways. Schools may be used as temporary shelters for displaced people.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

HAZARD NAME	HAZARD IDENTIFICATION	VULNERABILITY			CONCLUSION
<p>NOTE: All Hazards marked by an asterisk (*) could be caused by a terrorist event.</p>	<p>1. Could this hazard affect _____ school district/school? If “NO” go down to next hazard. If “YES” complete #2-5</p>	<p>2. What is the likelihood of the event occurring at, or in the immediate vicinity of _____ school district/school?</p>	<p>3. Could _____ school district/school property damage, or loss of use of _____ school district/school property result if this event occurred?</p>	<p>4. Could any person be killed or injured if this event occurred?</p>	<p>5. If you answered “YES” to question #3 or #4, this hazard is significant and must be addressed in your All Hazards Plan.</p>
<p>WATER LOSS OTHER - Includes broken water lines, and contamination due to accidental or intentional introduction of hazardous materials into public water supplies, and wells. All school district/school well heads should be padlocked to reduce risk.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

WEATHER HAZARDS OTHER - Includes severe cold, winter and summer storms, lightning strikes, and hail. Weather hazards can impact hasty evacuations, emergency response, and sheltering operations.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No