UCSB EMERGENCY STATUS REPORT

☐Use this form to communicate to the Emergency Operations Center (EOC) or your Satellite EOC/DOC.
☐ **Immediately call 911(campus phone 9-911) to report life-threatening emergencies**.
☐ Email to: eoc@ehs.ucsb.edu, ☐ Fax to: x8659 ☐Call: x3901 ☐ Use Runner ☐ Radio Information

Building/Floor/Room #:_____**Date**:_____

Department: _____

Your Name: _____**Phone (office & Cell)**:_____

Your Location (if different than above): _____

Your department evacuated to: _____

Problems/Urgent Needs			Exact Location / Details
Serious Injuries?	☐ Yes	☐ No	
First Aid Station Established?	☐ Yes	☐ No	
Fire/Explosion?	☐ Yes	☐ No	
☐ In progress			
☐ Threat			
☐ Extinguished			
Building Collapse?	☐ Yes	☐ No	
People Trapped/Missing?	☐ Yes	☐ No	
Disabled Evacuated from Bldg.	☐ Yes	☐ No	
Hazardous Materials Spill?	☐ Yes	☐ No	
☐ Uncontained			
☐ Contained			
☐ Cleaned Up			
Services Functional?	☐ Yes	☐ No	
Electrical	☐ Yes	☐ No	
Emergency lighting	☐ Yes	☐ No	
Telephones/radio	☐ Yes	☐ No	
Water	☐ Yes	☐ No	
Elevators	☐ Yes	☐ No	
Gas	☐ Yes	☐ No	
Other Observations/Needs: _____			
☐ NO MAJOR PROBLEMS AT THIS TIME			