

Safety Plan

Name: _____ School Caregiver: _____ Date: _____

Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a suicidal crisis may be developing:

1. _____
2. _____
3. _____

Step 2: How can I keep myself safe?

1. _____
2. _____
3. _____
4. _____
5. The one thing that is most important to me and worth living for is:

Step 3: Trusted adults at school, home, or in my community whom I can ask for help:

1. Name: _____
Phone: _____
2. Name: _____

Phone: _____

3. Name: _____

Phone: _____

Step 4: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. _____

2. _____

3. _____

Step 5: Professionals or agencies I can contact during a crisis:

1. Clinician Name: _____

Phone: _____

Clinician Pager or Emergency Contact Number: _____

2. Local Urgent Care Services: _____

Urgent Care Address: _____

Urgent Care Phone: _____

Step 6: Signature of Student: _____

Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

CrisisTextLine.org (24 hours nationwide) Text '741741'

Have an iPhone? Talk to Siri for connection to help!