



## UNSCHEDULED SCHOOL CLOSURE CHECKLIST

To be completed by the Head Teacher for every school closure or part closure.

Name of School: .....

Extent of closure (please specify): .....

Date & time of expected school closure : .....

Expected duration of closure : .....

### Reason for closure (please tick box):-

Adverse weather report for local area	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, detail source:
Adverse road conditions in area	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please detail (e.g. snow, flood, road blocked):
Power/Water supply interrupted	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, detail:
Heating system failure	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Structural damage at school	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please detail:
Transport operator not running service	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please detail service runs:
<b>Notification:</b>			
	School Staff		Yes <input type="checkbox"/>
	Pupils		No <input type="checkbox"/>
	Parent/Carer		<input type="checkbox"/>
	School transport		<input type="checkbox"/>
	Local Radio		<input type="checkbox"/>
	Ed & Children's Services Department		<input type="checkbox"/>

Designated Responsible Person: .....(signature)

Head Teachers should use form as checklist for informing Faire by telephone. Completed form then forwarded (e-mail/fax) to the Director of Education and Children's Services with the subject of the e-mail to be school closure.

The information will be shared with the Roads Authority, Emergency Planning and Northern Constabulary to ensure that all agencies have up-to-date information to plan for the safety of all school users.