1. Incident Name:	2. EOC Incident Number:	3. Date/Time Initiated:
		Date: Time:
	ng the total area of operations, th	Date: Time: Time: Time: Time
Health and Safety Hazards, with cas	scading risks/events and develop	or transfer of command): Recognize potential necessary measures (remove hazard, provide ect school personnel, students and responders
6. Prepared by: Name:		Signature:
Page 1	Date/Time:	

1. Incident Name: 2. EO		2. EOC Incident Number:	3. Date/Time Initiated:	
			Date: Time:	
7. Current and Planned Objectives:				
8 Current and	I Planned Actions and S	Stratogios		
Time:	Actions:			
6. Prepared b	<b>y:</b> Name:	Position/Title:	Signature:	
Page 2		Date/Time:		

1. Incident Name:	2. EOC Incident Number:	3. Date/Time Initiated:
9 District Organization /fill	in additional organization as appropriate):	Date: Time:
9. District Organization (fill	in additional organization as appropriate): Incident Commander	Liaison Designee
	Superintendent EOC Desi	
		Safety Designee
		Public Information Designee
Operations Designee	Planning Designee Logist	tics Designee Finance/Admin Designee
6. Prepared by: Name:	Position/Title:	Signature:
Page 3	Date/Time:	

1. Incident Name:		2. EOC Incid	lent Numbe	er:		3. Date/Time Initiated:
						Date: Time:
10. Resource Summary:		<del></del>	<del> </del>	<del>, ,</del>		
Resource	Resource Identifier	Date/Time Ordered	ETA	Arrived	N	otes (location/assignment/status)
	Τ					
	Τ		 			
	<u> </u>		 			
6. Prepared by: Name: _		Positio	on/Title:	· ·		Signature:
Page 4			Time:			

#### **Incident Briefing**

**Purpose.** The Incident Briefing provides the Incident Commander, Superintendent EOC Designee, and the Command and General Staffs with basic information regarding the incident situation and the resources allocated to the incident. In addition to a briefing document, the Incident Briefing template also serves as an initial action worksheet. It serves as a permanent record of the initial response to the incident.

**Preparation.** The briefing form is prepared by the Incident Commander, Superintendent EOC Designee, for presentation to the Superintendent, EOC or Chancellor designee, along with a more detailed oral briefing.

#### Notes:

• The Incident Briefing template can serve as part of the initial Incident Action Plan (IAP).

Block Number	Block Title	Instructions	
1	Incident Name	Enter the name assigned to the incident.	
2	EOC Incident Number	Enter the number assigned to the incident.	
3	<ul><li>Date/Time Initiated</li><li>Date, Time</li></ul>	Enter date initiated (month/day/year) and time initiated (using the 24- hour clock).	
4	<b>Map/Sketch</b> (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, or other graphics depicting situational status and resource assignment)	Show perimeter and other graphics depicting situational status, resource assignments, incident facilities, and other special information on a map/sketch or with attached maps. North should be at the top of page unless noted otherwise.	
5	Situation Summary and Health and Safety Briefing (for briefings or transfer of command): Recognize potential Health and Safety Hazards, with cascading risks/events and develop necessary measures (remove hazard, provide personal protective equipment, warning people of the hazard) to protect school personnel, students, and responders from those hazards.	Self-explanatory.	
6	Prepared by <ul> <li>Name</li> <li>Position/Title</li> <li>Signature</li> <li>Date/Time</li> </ul>	Enter the name, position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared.	
7	Current and Planned Objectives	Enter the objectives used on the incident and note any specific problem areas.	

Block Number	Block Title	Instructions
8	Current and Planned Actions and Strategies • Time • Actions	Enter the current and planned actions, strategies, and time they may or did occur to attain the objectives. If additional pages are needed, use a blank sheet or another form.
9	<ul> <li>Current Organization (fill in additional organization as appropriate)</li> <li>Incident Commander/ Superintendent EOC Designee</li> <li>Liaison Designee</li> <li>Safety Designee</li> <li>Public Information Designee</li> <li>Planning Designee</li> <li>Operations Designee</li> <li>Finance/Administration Designee</li> <li>Logistics Designee</li> </ul>	<ul> <li>Enter on the organization chart the names of the individuals assigned to each position.</li> <li>Modify the chart as necessary and add any lines/spaces needed for assistants and/or agency representatives</li> </ul>
10	Resource Summary	Enter the following information about the resources allocated to the incident.
	Resource	Enter the number and appropriate category, kind, or type of resource ordered.
	Resource Identifier	Enter the relevant agency designator and/or resource designator (if any).
	Date/Time Ordered	Enter the date (month/day/year) and time the resource was ordered.
	• ETA	Enter the estimated time of arrival (ETA) to the incident.
	Arrived	Enter an "X" or a checkmark upon arrival to the incident.
	<ul> <li>Notes (location/ assignment/status)</li> </ul>	Enter notes such as the assigned location of the resource and/or the actual assignment and status.

You can use the above information to create an Incident Action Plan (IAP), a dynamic, written plan used during an incident to outline the objectives, strategies, and actions needed to manage the event effectively. It's a detailed guide for incident commanders, emergency responders, and other personnel involved in managing the incident.

The IAP is based on the Incident Command System (ICS), a standardized framework for coordinating and collaborating among different agencies and stakeholders.