



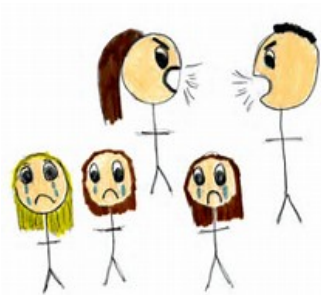
MY SAFETY PLAN

Name: _____

DOB: _____

Date: _____

My Triggers: (Things that make me upset, feel bad, or think about dying.)



Arguments at Home






Problems with Classmates/Friends



Problems in School

Describe:

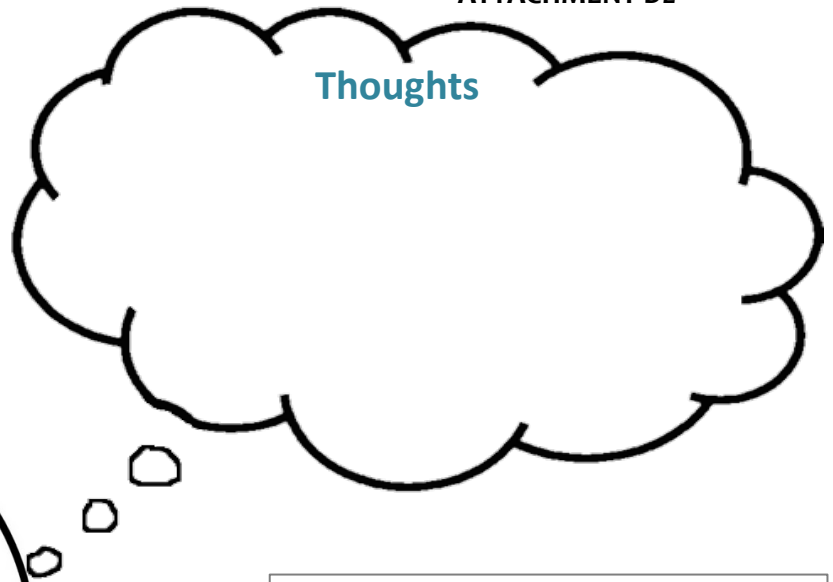
When this happens, I feel...

 Sad	 Mad	 Hurt	 Scared
 Lonely	 Frustrated	 Worried	Create Your Own Feeling

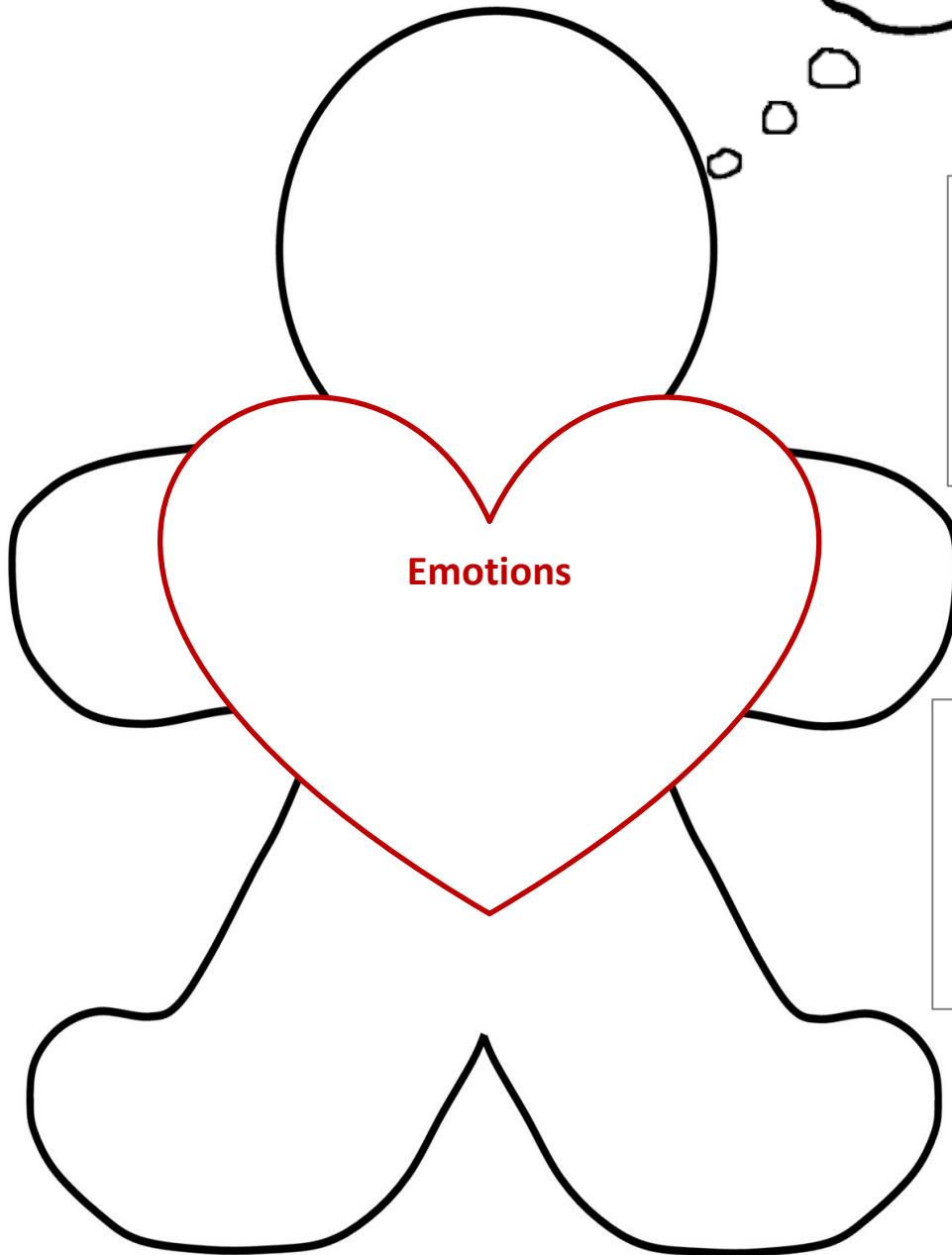
My Warning Signs

What signs tell me I'm starting to get upset/overwhelmed?

Directions: Write/draw your warning signs in the image below.



Thoughts



Emotions

Body Sensations

When I am mad I feel my...

- heart racing
- stomach ache
- sweaty palms
- add your own example in the image on the left

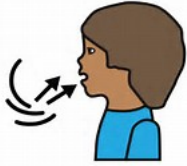
Behaviors

When I am mad I...

- hurt myself
- pick fights
- spend time alone or isolate myself
- add your own example in the image on the left

My Coping Skills/Healthy Behaviors: (What are some helpful things that will take my mind off the problem?)

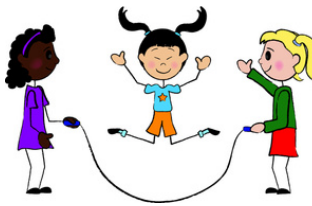
Take deep breath



Relaxation Techniques



Play with My Pet



Play with My Friends



Draw/Art

Identify your coping skills:

1. _____
2. _____
3. _____

School Support: When I feel this way at school, I can go to...



Teacher



Principal, Counselor, Support staff



Other School Staff

Name three trusted adults at school:

1. _____
2. _____
3. _____

Note: Individuals identified as trusted adults may be notified and provided the *Adult Gatekeeper* handout (Attachment E).

Home/Community Support: When I feel this way at home, I can go to...



**Parent/Guardian, Grandparent,
Adult Sibling, Aunt/Uncle**



Church Clergy, Coach, Therapist

Name three trusted adults at home or in my community:

1. _____
2. _____
3. _____

Note: Individuals identified as trusted adults may be notified and provided the *Adult Gatekeeper* handout (Attachment E).

My other thoughts...

An illustration of an open notebook. The left page has the text "My other thoughts..." written on it. The right page is blank and yellowed, suggesting it's for writing. The notebook has red covers on the sides.

My Crisis Plan and Resources

I or my trusted adult can call...

- **911** for immediate support
- *Los Angeles County Department of Mental Health ACCESS (800) 854-7771* – 24 hours
- *National Suicide Prevention Lifeline (800) 273-TALK or (800) 273-8255* – 24 hours
- *California Youth Crisis Line (800) 843-5200* – 24 hours, bilingual
- *TEEN LINE (310) 855-HOPE or (800) TLC-TEEN / (800) 852-8336* – a teen-to-teen hotline with community outreach services, from 6pm-10pm PST daily. Text, email and message board also available, with limited hours-visit <http://teenlineonline.org> for more information.
- *The Trevor Project (866) 4-U-TREVOR or (866) 488-7386* – a 24-hour crisis line that provides crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender and questioning (LGBTQ) young people ages 13-24. Text and chat also available 24/7, visit www.thetrevorproject.org for more information.

Signatures

Student Signature

Date

Parent/Guardian Name (please print)

Phone#

Parent /Guardian Signature

Date

Administrator/Case Carrier (please print)

Title

Administrator/Case Carrier Signature

Date

____ (Initial) *I, parent/guardian of _____, consent to the notification of the Adult Gatekeeper(s) identified under the Home/Community* section of my child's Safety Plan.*