

# 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	
First Aid Station Established? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Fire/Explosion? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress <input type="checkbox"/> Threat <input type="checkbox"/> Extinguished	
Building Collapse? <input type="checkbox"/> Yes <input type="checkbox"/> No	
People Trapped/Missing? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Disabled Evacuated from Bldg. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Hazardous Materials Spill? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Uncontained <input type="checkbox"/> Contained <input type="checkbox"/> Cleaned Up	
Services Functional? <input type="checkbox"/> Yes <input type="checkbox"/> No Electrical <input type="checkbox"/> Yes <input type="checkbox"/> No Emergency lighting <input type="checkbox"/> Yes <input type="checkbox"/> No Telephones/radio <input type="checkbox"/> Yes <input type="checkbox"/> No Water <input type="checkbox"/> Yes <input type="checkbox"/> No Elevators <input type="checkbox"/> Yes <input type="checkbox"/> No Gas <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Other Observations/Needs:</b> _____	
<input type="checkbox"/> NO MAJOR PROBLEMS AT THIS TIME	