



The School Board of Brevard County, Florida
STUDENT RE-ENTRY/SAFEGUARDS PLAN

An individual student re-entry/safeguards plan, unlike a typical behavior plan, addresses specific behavior that is dangerous to the student and/or others.

Date:

Student Name:		D.O.B.:	Grade:
Does the student have an IEP? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Case Manager:			
ELL Student? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Case Manager:			
Does the student have a Section 504 accommodation plan? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, Case Manager:			
FBA/BIP? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Case Manager:			
Safety Plan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Case Manager:			
Individual Health Plan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Case Manager:			
<input type="checkbox"/> Check here if <i>Authorization for Release & Exchange of Information Form</i> was completed			
Contact Information			
Parent/Legal Guardian:			
Cell Phone:	Home Phone:	Other:	
Emergency Contact:			
Places Student May Be If Missing During School Hours			
On School Grounds			
Off School Grounds			
Medical Information			
Physician:			
Diagnoses:			
Medications:			
Allergies/Special Considerations:			
Description of Specific Unsafe Behaviors (why student requires a safeguard plan)			



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CRISIS RESPONSE PLAN

What to do if student exhibits above described behavior	Who will do what/backup staff	
How will plan be monitored?	Who/Back-up person?	
How will decision be made to terminate the plan?	Who/Back-up person?	
Next Review Date (Approximately 2 weeks from initiation of plan or last review date):		
Current Agencies or Outside Professionals Involved		
Name	Agency	Phone
1.		
2.		
3.		
Student Safeguard Team Members		
Name/Signature	Title	Date
1.	Principal	
2.	Safeguard Plan Coordinator	
3.		
4.		
5.		

