



Health/Life Safety Verification Form

Name of School: _____

I hereby certify that each item in this form has been verified and the responses checked are correct.

Principal's Signature

Date

Yes	No	N/A	Item
			Annual Review of Crisis Management Plan Date:
			Bleacher Inspection Certificate/Letter #1 Date Inspected: #2 Date Inspected:
			Boiler Inspection Certificates (Posted) #1 Exp. Date: # 2 Exp. Date:
			Chemical Inventory and SDS Forms Properly Displayed
			Communication System is Fully Functional
			Drills: Three (3) Evacuation Drills, one (1) Bus Evacuation Drill, one (1) Shelter in Place Drill and one (1) Law Enforcement Drill – Must Have Documentation
			Elevator/Lift Inspection Certificate Expiration Date:
			Emergency Lighting Log and Inspections are Current – Must Have Documentation
			Fire Alarm System is Fully Functional Date Tested: - Provide Inspection Documents
			Flameproof Curtain Certificate/Tag on File in School Office
			Safety Reference Plan/Floor Plan with Utility Shutoff on File in School Office
			Shop and Science Safety Glasses are Either Personal or Sanitized
			Written/Visual Evacuation Instructions Posted in Each Room
			All Flammable/Combustible Materials Stored in Approved Containers
			Toxic Art Supplies in School Act (105 ILCS 135/) is Followed

You may give this completed form to the Health-Life Safety Inspectors the day of your visit. You are also welcome to mail or fax this form at your convenience. Always remember, if you have any questions, please do not hesitate to contact us.