

Family Safety Plan

My Family

Full Name	Date of Birth	A # or SS #	Phone

Our Important Contacts

Key Person	Name	Phone
Trusted Caregiver		
Trusted Caregiver		
Our Lawyer		
Family in _____ (Country)		

Our Things

Where we live:

Address:

Do you own your own home?

Spare house keys with:

Automobiles:

Spare car keys with:

Make/Model/Year/License Plate:

Make/Model/Year/License Plate:

Make/Model/Year/License Plate:

Important Documents: (please keep in a safe place)

Check box to indicate I have the following documents:

Passports	
Birth Certificates	
Permanent Resident Card (green card)	
Employment Authorization Card	
Social Security Card	
Driver's License	
Lease/Deed/Mortgage	
Immigration Documents	
Durable Power of Attorney for Children	
Durable Power of Attorney for Property	
Car Titles	

Where are these documents located?

A copy of these documents is located:

Childcare Plan:

Child's Name	
Attends What School (Note Start and End Times)	
Who should be contacted to care for the child if parent not available? (Name & Phone)	
Immigration Status of Child?	
Do you have a birth certificate and/or passport for the child?	

Child's Name	
Attends What School (Note Start and End Times)	
Who should be contacted to care for the child if parent not available? (Name & Phone)	
Immigration Status of Child?	
Do you have a birth certificate and/or passport for the child?	