**Bushfire Preparedness School Relocation Plan**

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| --- | --- | --- | --- |
| **Relocating School/Campus Name:** | **Principal:** | | **Contact Number:** |
| **Relocating School Address:** | | | |
| **Number of enrolled students:** | | **Number planning to relocate:** | |
| **Number of staff:** | | **Number planning to relocate:** | |
| **Host School Name:** | **Principal:** | | **Contact Number:** |
| **Host School Address:** | | | |
| **Distance by road from Relocating School to Host School (kms):** | | | |

|  |  |
| --- | --- |
| **Item** | **Comments** |
| **HOST SCHOOL** |  |
| The host school has classroom and outdoor space and facilities to accommodate all relocating students and staff, including those with special needs. | Please describe where students will be accommodated. |
| The following infrastructure support has been negotiated to facilitate successful relocation. | Relocatable classrooms  Portable toilets  Furnishings – please specify |
| The relocating school has been oriented to the host school’s Emergency Management Plan and response requirements for specific emergencies. |  |
| In an emergency, and where evacuation is not possible, the host school’s shelter-in-place location will accommodate the relocating students and staff. | Please describe how any issues have been resolved. |
| **RELOCATING SCHOOL** |  |
| Parents/carers and school council have been consulted about the relocation. | Please list any concerns raised and describe how these have been resolved. |
| Relocating school staff have been consulted about the relocation. |  |
| Staff/student ratios able to be met. | Yes/No |
| Number of children requiring Outside School Hours Care. |  |
| Outside School Hours Care requirements have been considered.  Describe what alternative arrangements will be in place. |  |
| **STUDENT TRANSPORT** |  |
| Indicative number of students to be transported to and from host school by parents.  Indicative number of students to be transported to and from host school by bus. |  |
| For bus transport the following arrangements have been negotiated:   * Name of bus provider/company contracted to provide service * Contact number * Pick up points and times * Drop off points and times, including contingency arrangements for adverse weather conditions * Cost if outside of scheduled routes | Attach map of bus route |
| Describe contingency transport arrangements if bus arrangements fail on the day. |  |
| **COMMUNICATIONS** |  |
| The following mechanisms are in place to communicate with relocating school parents/carers:   * at the commencement of the summer season; and * at short notice with confirmation that communications has been received |  |
| Other users of the site (e.g. sporting and community groups) have been advised of the relocation and alternative arrangements made as required. |  |
| Support services (including mobile library, SSS, school nurses, volunteers, canteen staff and crossing supervisor) have been notified of the relocation approval and will be informed in advance of each relocation. |  |
| **OTHER CONSIDERATIONS** |  |
| For example:  Financial implications  If there are financial implications please itemise these costs. |  |
| Other: |  |

These arrangements are agreed upon by the undersigned:

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(Signature of the Principal of Relocating School) (print name) (date)

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(Signature of the Principal of Host School) (print name) (date)

**Approved by**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of the Regional Director) (print name) (date)

Upon approval, relocating school and host school will:

* Attach Relocation Plan to Emergency Management Plans
* Share information about relocation with local emergency services (CFA and VicPol)
* Download VicEmergency App to staff phones, and use the VicEmergency website on computers for situational awareness