PERSONAL EMERGENCY PROFILE **PLACE PHOTO HERE** DATE: _____ NAME:_____ ADDRESS: ——— PHYSICAL DESCRIPTION: _____ **TRACKING FREQUENCY #** (If applicable) **EMERGENCY CONTACT(S)** IF LOST, MAY BE FOUND AT: ____ (Likely places to go) NAME: _____ PHONE NUMBER: _____ NAME: ____ PHONE NUMBER: _____ **RESTRICTIONS** (Allergies and diet) MEDICAL NEEDS (Diagnosis, health concerns) **SIGNS OF ESCALATION** (Changes in behavior that show increased or decreased anxiety, anger, etc. Recommendations for do's and don'ts.) LIKES (Attractions, favorite things, hobbies, interests, foods, drinks, verbal exchanges, etc.) **DISLIKES** (Triggers, sensitivities, fears, things to avoid, foods, drinks, verbal exchanges, etc.) Symbols aid understanding and communication for everyone. Show and point to symbols when talking with a rescued person. drink call home deep breath cold Dad go home eat Add personal Add personal pain Add personal Yes safe No message here message here message here OW!

Annually (or more frequently) complete and share with school staff, family, friends, neighbors, caregivers, police, fire, and rescue professionals.