

PENN MANOR SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED: August 19, 2013

REVISED:

805-AR-5. BOMB THREAT REPORT

This report must be placed near all telephones receiving incoming calls.

BOMB THREAT CHECKLIST

Date call received: _____

Exact time of call: _____

Exact words of caller: _____

QUESTIONS TO ASK

1. When is the bomb going to explode? _____

2. Where is the bomb located? _____

3. Is the bomb disguised, concealed, in the open? _____

4. What does it look like? _____

5. What kind of bomb is it? _____

6. What will cause it to explode? _____

7. Did you place the bomb? _____

8. Why? _____

9. How did it get into school? _____

10. What is your name? _____

CALLER'S VOICE

Male or female? _____

Juvenile or adult? _____

Speech impediment? _____

Intoxicated? _____

Circle all of the following that apply:

Calm	Disguised	Nasal	Angry	Broken
Stutter	Slow	Sincere	Lisp	Rapid
Giggling	Deep	Crying	Squeaky	Excited
Stressed	Accent	Loud	Slurred	Normal

If the voice is familiar, whom did it sound like? _____

Were there any background noises? _____

Remarks: _____

Person receiving call: _____

Telephone number call received at: _____

Date: _____

Reported call immediately to: _____

Administrator Notified: Local law enforcement _____
 State Police _____
 Fire Department _____

Administrator Signature

Date