

School District - Regional Office of Education

EMERGENCY HEALTH/LIFE SAFETY FUNDING REQUEST FOR PRELIMINARY AUTHORIZATION

School Name and Address	District
	County

In accordance with the Health/Life Safety Code for Public Schools (23 Ill. Adm. Code 180 - Section 180.530 Emergency) an emergency situation exists that: *(Please check the appropriate statement(s)).*

CONDITION(S):

- presents an imminent and continuing threat to the health and safety of students or other occupants

- requires complete or partial evacuation of the building

- consumes one or more of the 5 emergency days or cause school to fall short of the minimum school calendar requirements.

Brief description of the nature of the emergency, how it correlates to the above conditions and the interim measures to sustain operations: *(Use additional sheets or attachments as necessary.)*

FUNDING:

- Fire Prevention and Safety Financing will be required to address the emergency.

<i>Signature of District Superintendent</i>	<i>Fax Number</i>	<i>Date</i>
<i>Signature of Regional Superintendent</i>	<i>Fax Number</i>	<i>Date</i>

ISBE USE ONLY	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%; border-bottom: 1px solid black; text-align: center;"><i>ISBE Designee</i></div> <div style="width: 45%; border-bottom: 1px solid black; text-align: center;"><i>Date</i></div> </div>	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
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