

San Diego Unified School District

ICS FORM #3 - STUDENT ACCOUNTING

| | | | |
|-----------------------------------------|--------------|---------------------------------------------|-------------|
| Site name: _____ | Room # _____ | Date: _____ | Time: _____ |
| Roll Call Completed? YES _____ NO _____ | | Number of students currently present: _____ | |

If students are missing, or there are additional people not on the roster with you, complete below:

Personnel/Students/Visitors Present Not on Class Roster

| Name | Age | M/F | Description (Hair, Eyes, Height, Build, Clothes) | Current Location | Student? Y/N | Injured? Y/N | Special Needs? |
|------|-----|-----|--------------------------------------------------|------------------|-----------------|-----------------|----------------|
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If anybody is injured or in need of medical attention, send them to First Aid as soon as it is safe to do so

Missing Students

| Name | Age | M/F | Description (Hair, Eyes, Height, Build, Clothes) | Last known Location | Special Needs? | Injured? Y/N | Found? Y/N |
|------|-----|-----|--------------------------------------------------|---------------------|----------------|-----------------|---------------|
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Additional Information: (Report gas/water leaks, blocked exits, structural damage, suspicious persons, etc)

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| Prepared by: _____ | Position/Title: _____ | Signature: _____ |
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