## **Individualized Safety Plan**

This plan is created to support survivors in identifying safe options and strategies to stay protected in different settings.

Personal Information			
Name:   Date:			
Emergency Contacts			
Name	Relationship	Phone	
Safe Places			
A room with a lock:			
Trusted neighbor/friend:			
Public or emergency spa	ce I can go to:		
• Safe address (if I leave): _			
Important Items to Pack (if lea	ving)		
□ ID/Driver's License □ Birth Certificates (self & child) □ Social Security cards □ Bank Statements □ Keys (home, car) □ Medications □ Cash/ATM card □ Important phone numbers □ Legal documents (protective of Clothes for self and children		JSB as well).	

## Safety During a Violent Incident



•	• If an argument begins, I will try to move to a room with <b>an exit</b> and <b>no weapons</b> .		
•	I will avoid rooms like: (e.g., kitchen, garage).		
•	I will use a code word with children/trusted contacts:		
Safety	When Preparing to Leave		
•	I will contact R.I.S.E and the National Domestic Violence Hotline:  (919) 283-1930   nciamrise@gmail.com		
	(800) 799-7233 or Text BEGIN to 88788		
•	I will plan transportation (car, bus, ride):		
•	I will not tell the abuser my plans.		
After L	.eaving		
•	Change locks/add security if possible.		
•	Alert trusted people (school, employer, landlord).		
•	Change the usual routine routes and times.		
•	Keep court orders/custody documents with you at all times.		
•	Block phone number or get a new phone.		
Client Signature: Advocate/Staff Signature:			
Date:			

