

BOMB THREAT CHECKLIST

Remain calm -- Gather information from the caller -- Advise the Principal

| FIRST QUESTIONS | DETAILS |
|---|---|
| Where did you put the bomb? | |
| When is it going to explode? | |
| What does it look like? | |
| Exact Wording of the threat? | |
| Why are you doing this? | |
| Was a caller ID visible on the phone and what was the number? | |
| Is/was the call recorded? | |
| Date and Time received? | |
| THE CALLER | DETAILS |
| Gender and estimated age? | |
| Any accent or speech impediment? | |
| Voice – loud, soft, fast or slow? | |
| Manner - calm, emotional, abusive? | |
| Did you recognise the voice? | |
| Did the caller seem familiar with the school? | |
| Coherent or incoherent? | |
| BACKGROUND NOISES | DETAILS |
| Inside or outside? | |
| Street or house noises heard? | |
| Other person/s with caller? | |
| Any music heard? | |
| Any machinery noises? | |
| Local or STD call? | |
| WHO RECEIVED THE CALL | DETAILS |
| Name: | |
| Number and Extension: | |
| Signature: | |
| ACTIONS | <ul style="list-style-type: none"> • Advise the Principal or most senior staff member present. • If none available Ring Triple Zero (000). • Post event – complete School Alert Notification |