



TRAINING OUTLINE

COURSE TITLE: _____ **DATE:** _____ **INSTRUCTOR:** _____

LOCATION: _____ **TIME:** _____ **COMPANY:** _____

Safety training was conducted on the above date by the instructor indicated. The following line items identify the topics covered during the training session.

SUMMARY OF TRAINING

- 1) Introduction
 - a) Standards
- 2) Run, Hide, Fight
 - a) Run
 - b) Helping the Wounded
 - c) Hide
 - d) Call 911
 - e) Fight
- 3) Police Response
 - a) Post Incident
- 4) Prepare & Prevent
 - a) Organizations & Businesses
 - i. Emergency Action Plan
 - ii. Training
 - iii. Respect
 - iv. Recognize Potentially Violent Behaviors
 - b) Public Places
 - i. Preparing Yourself
 - ii. Situational Awareness
- 5) Conclusion