



LOS ANGELES UNIFIED SCHOOL DISTRICT POLICY BULLETIN

ATTACHMENT A

LAUSD Explosive Device Threat Report

School:

Date of Call:	Time of Call:
Person Receiving Call:	Incoming Phone No. on Caller ID:

I. REPORT OF PERSON RECEIVING CALL

Keep the caller on the line as long as possible (ask caller to repeat statements, ask more questions) and signal to another person to call police.

Questions for Caller

Ask the caller the following questions and write answers in the spaces below:

Explosive Device Information:

Where is the explosive device? (Get most specific information as possible.)

When is it going to explode?

What kind of explosive device is it?

What does it look like?

Who set the explosive device?

Why was the explosive device set?

What can we do for you to keep the device from exploding?

Caller Information:

What is your name?

How old are you?

Where do you live?

(if voice youthful) Are you making this threat to avoid taking a test/final?

Are you a member of a terrorist organization?

Which one?

Yes ☐ No ☐

How can you be contacted?:



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Call Characteristics Evaluation

Check and describe the noted characteristics in the spaces provided below.

Message Details: (Use the caller's exact language where possible.)

Caller's Voice:

Male:	Female:	Child: Yes <input type="checkbox"/> No <input type="checkbox"/>	Age:
Intoxicated:	Speech Impairment:		
Accent:	Type:		
Whispers:	Angry:		
Foul/Inappropriate language:	Educated:		
Irrational:	Incoherent:		
Voice disguised/Altered:			
Recorded threat message:	Read from script:		
Is voice familiar?	Who does it sound like?		

Background Noise:

Music:	Babies/Children:
Conversation:	Playground/School:
Airplanes:	Traffic:
Animals:	PA System:
Machines:	Typing:
Other:	

II. REPORT BY PRINCIPAL

Name of school employee contacting police:

Date police contacted:	Time:
Name of police department call taker:	
Name of responding officer:	
Name of responding police agency:	

Was a search for the explosive device conducted? | Yes ☐ | No ☐

Details of search:

Was a school evacuation conducted? | Yes ☐ | No ☐

Full Evacuation:	Partial Evacuation:
Buildings or areas evacuated:	

Send one copy of this completed form to the ESC Operations Coordinator, send one copy to School Police at wcoffice@laspd.com, and keep one copy in school records. Please also upload a copy to the ISTAR submitted on the incident.