

Wright State University

Emergency Action Plan—Quick Reference

BOMB THREAT CHECKLIST

Exact wording of threat: _____

How many bombs? _____

Where is bomb located? _____

When will bomb explode? _____

What does bomb look like? _____

What kind of bomb is it? _____

What will cause it to explode? _____

How can you be contacted? _____

Caller's voice sounded...

- | | | | |
|-------------------------------------|------------------------------------|--|--|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> Adult | <input type="checkbox"/> Juvenile |
| <input type="checkbox"/> Accent | <input type="checkbox"/> Disguised | <input type="checkbox"/> Calm | <input type="checkbox"/> Angry/Threatening |
| <input type="checkbox"/> Incoherent | <input type="checkbox"/> Soft/Loud | <input type="checkbox"/> Other Characteristics _____ | |

Who did it sound like? _____

Sounds in the background were...

- | | | | |
|--|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Quiet | <input type="checkbox"/> Voices | <input type="checkbox"/> Music | <input type="checkbox"/> House noise |
| <input type="checkbox"/> Vehicle(s) | <input type="checkbox"/> Aircraft | <input type="checkbox"/> Street noise | <input type="checkbox"/> Office Machinery |
| <input type="checkbox"/> Factory/Machinery | <input type="checkbox"/> Other _____ | | |