

STUDENT SAFETY PLAN

NAME: _____

DATE: _____

STEP 1: What are some of my warning signs when I'm starting to think about hurting myself?
(e.g., What do I think? How do I feel? What do I do or stop doing? How do I act?)

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STEP 2: What has kept me from hurting myself?

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STEP 3: What can I do, on my own, to help me feel better or to keep me from hurting myself?

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STEP 4: Who can I talk to or be around who will help me feel better?
(e.g., friends, pets, parents, family members, teachers, counselors, coaches, neighbors, church members)

NAME	PHONE NUMBER

STEP 5: Who are my go-to adults in my life? Who can I talk to about my feelings of wanting to hurt myself?
(e.g., parents, family members, teachers, counselors, coaches, neighbors, church members, trusted adults)

NAME	PHONE NUMBER

STEP 6: What agencies, crisis lines, or professionals can I call/text to help me?

AGENCY/CRISIS LINE/PROFESSIONAL	CONTACT INFO
Emergency	911
Suicide Prevention Lifeline	1-800-273-TALK (8255), or ask Siri
Crisis Text Line	Text "help" or "home" 741741
SafeUT App	Download the app and chat, text, or call
MCOT (University Neuropsychiatric Institute Mobile Crisis Outreach Team)	801-587-3000
Therapist:	