

Safety Plan

I, _____, agree to **not** harm anyone in any way, attempt to kill myself or another person, or kill myself or anyone else.

Warning signs that I may be in crisis (images, thoughts, behaviors, situations, moods):

What can I do to take my mind of my problems if I don't want to talk to anyone? (activities, hobbies, relaxation techniques, distractions):

Where can I go to distract myself? (out with friends, movies, park):

I agree to get rid of the things I have thought about using to harm others or myself, and to remove them from my presence:

If I feel overwhelmed with thoughts of hurting another person or myself, I agree to contact the following persons before hurting or killing myself or another person:

If I can't reach the people above, I agree to contact my doctor or psychiatrist or the following agencies before I attempt or commit suicide or homicide:

- In the U.S.: Suicide Prevention Lifeline: 1-800-273-TALK (8255)
- If I am in crisis, I will call 9-1-1

These are the things or people that are most important to me and that I want to live for:

I agree to come to my next appointment on _____ at _____ with _____.

I agree that this plan is important and worth doing. I promise to abide by this plan.

Signed _____

Date _____

Witnessed by _____

Date _____