



CALIFORNIA STATE UNIVERSITY, DOMINGUEZ HILLS

## EVACUATION ROLL CALL SITE ATTENDANCE CHECKLIST

Department: \_\_\_\_\_

Division: \_\_\_\_\_

Location: \_\_\_\_\_

Floor: \_\_\_\_\_

DATE: \_\_\_\_\_

Floor Warden Name: \_\_\_\_\_

**\*\*\*In the event of a disaster, use this form to account for your employees at your Evacuation Roll Call Site. Keep this form near you at all times or a place where the form is visible and easily accessible should an evacuation occur.**

Employee Name	Present	Missing	Not at Work	Injured	Unresponsive