TEXAS DEPARTMENT OF PUBLIC SAFETY ACTIVE SHOOTER ALERT REQUEST FORM Call (512) 424-7981 or (866) 786-5972 or Fax (512) 424-7418

| Requesting Agency Information *Required Fields in red with an asterisk INITIAL UPDATE | Activation Criteria: 1. An active shooter is in the requesting agency's jurisdiction Active Shooter — an individual actively engaged in killing or attempting to kill people in a populated area. (Federal Bureau of Investigation) |
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| * Request | YES NO IF THE ANSWER TO 1 IS YES, CONTINUE: |
| * Date of Request | Determination that an Active Shooter Alert would assist individuals near the active shooter's location |
| | YES NO IF THE ANSWER TO 1 & 2 ABOVE IS YES, CONTINUE: |
| * Name of Requesting Agency | 3. Verification exists of the active shooter situation through a preliminary investigation by the requesting agency |
| * Contact number for Requesting Agency | YES NO IF THE ANSWER TO 1, 2 & 3 ABOVE IS YES, CONTINUE: |
| * Fax number for Requesting Agency | 4. The active shooter's last known location is identifiable |
| | YES NO |
| * Name/Title of Investigating Officer | |
| * Cell phone number for Investigating Officer | |
| * Phone number for media inquiries | |
| I have authority to submit this request on behalf consists of alerting all cellular devices within a spe occur for the discontinuation and utilization of other | of my agency (Requester acknowledges they are aware an Active Shooter Alert activation ecified mileage radius via Wireless Emergency Alert (WEA). A similar notification alert willer available resources. |
| verify circumstances of each request to ensur if the answer is NO to ANY of the alert cri Department of Public Safety will contact th | ccurately answering the above questions. The Department of Public Safety will recircumstances meet criteria. Do NOT send ACTIVE SHOOTER ALERT requests iteria. If activated, your request is only valid for a period of 1 hour. The requesting agency 15 minutes before the ending of each hour for status prior to or during the 1 st hour contact from the Department of Public Safety. It is all extension requests. |
| Incident Date: Time: | Suspect is: On foot In vehicle |
| Last known location: | |
| Zip code for location: | Recommended alerting radius mileage (up to 50 miles): |
| Suspect #1 | |

description:

Request Form Instructions

Option 1:

Submit Request via Email

- 1. Once completed, please email the form and any photos to TXFC@dps.texas.gov.
- 2. Contact the Department of Public Safety at (512) 424-7981 or (866) 786-5972 to verify receipt of the email request.

Option 2:

Submit Request via Fax

- 1. Once completed, print and fax the request form to the TXFC at (512) 424-7418.
- 2. Contact the Department of Public Safety at (512) 424-7981 or (866) 786-5972 to verify receipt of the faxed request.