MY
SAFETY
PLAN
I am committed to not hurting or killing myself because:

I realize that I may again in the future have thoughts or urges to hurt or kill myself. Therefore, I will do the following now to minimize my access to ways to hurt or kill myself:
I have learned that the following situations can result in me having thoughts or urges to hurt myself or kill myself:

When I am in these situations, I will now:
I have learned that the following thoughts can result in me having urges to hurt myself or kill myself:

When I have these thoughts, I will now:
I have learned that the following emotions can result in me having thoughts or urges to hurt myself or kill myself:

When I am feeling these emotions, I will now:
Sometimes, despite the above, I might still have urges to hurt or kill myself. At these times, I will engage in the following distracting activity or activities for at least an hour to give the urge time to go away:

If I am thinking of acting on the urge, I agree to first call 1-800-SUICIDE and/or talk to at least one of the following people:

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I commit to doing everything in this safety plan because I want to stay alive and not hurt or kill myself.

I realize that there might sometimes be barriers to following this safety plan, such as:

However, I will remain committed to the plan and when faced with these barriers, I will:

In sum, this safety plan is important to me and worth doing. This is something I am committed to and plan to follow. I will make changes to this plan as needed in order to keep myself safe.

_____________________________________________  __________________
Signature                                      Date

_____________________________________________  __________________
Witness                                        Date