



FREE TO MOVE

Free to Move: Personal Safety Planning Worksheet

Your safety plan is unique to YOU. This worksheet is designed to help you prepare intentionally, move confidently, and respond with clarity. There are no “perfect” answers; only practices that support your freedom to move.

1. My Movement Routine

Typical activity:

☐ Walking ☐ Running ☐ Biking ☐ Transit/Commuting ☐ Other: _____

Usual time of day: _____

Usual location or route: _____

Are you alone or with others? _____

Any areas on your route that feel unsafe?

2. Safety Check-In

Before I head out, I will...

- ☐ Let someone know where I'm going
- ☐ Share my location using an app
- ☐ Bring a safety tool I've trained with (e.g., whistle, personal alarm, pepper spray)
- ☐ Make sure my phone is charged
- ☐ Wear reflective gear or lights (if needed)

My go-to safety app or tool is: _____

3. My Support System

Who could I text/call before or after an activity?

Name: _____

Name: _____

How will I check in with them?

- ☐ Text on arrival/return
- ☐ Shared location
- ☐ Scheduled check-in time

Other:

My Empowered Plan

One small change I can make to feel safer is: