



## NOTICE OF COMPLETION Emergency Operations Plan (EOP)

8/14/2025

**School Year:** SY 2025-2026

**District/Charter/Private School Name:** LIFE CHRISTIAN ACADEMY

I certify that the above referenced district, charter, or private school has completed the

requirements for the development of an Emergency Operations Plan (EOP) and additional requirements in Nevada Revised Statute (NRS) [388.229-388.291](#) for public schools and [NRS 394.168-394.1699](#) for private schools.

I also certify that our school/school district EOP Development Committee and EOP School

Committee have both reviewed and updated our Emergency Operations Plan. The EOP has been submitted to the Nevada Division of Emergency Management website and a Notice of Completion has been posted at each school or on the school's website.

**Signature of School Official:** *Clare Pretlove*

**Print Name:** Clare Pretlove

**Title:** Head of School

**Date:** 8/14/2025