

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

Fire Drill (5 required)(3 by 12/1)

1:10 Standard

Tornado Drill (2 required)(1 in March)

_____ Class Change

Shelter in Place (1 required)

_____ Recess

Lock Down (2 required)(1 prior to Dec 1 & 1 after Jan 1)

_____ Lunch

Cardiac Drill (1 required)

Name of Reporting School: PARKSIDE ELEMENTARY

Date of Drill: 10/23/14 Time Drill was held: 1:10 (a.m./(p.m.))

Exact time required to evacuate/shelter/secure: 1:37 sec

Total Participants: 300* Remarks: _____

This report is for Emergency Drill Fire# 4 out of 5 for school year 20 14 /20 15

Tornado# _____ out of 2 for school year 20 ___/20 ___

Shelter IP# _____ out of 1 for school year 20 ___/20 ___

Lockdown# _____ out of 2 for school year 20 ___/20 ___

Cardiac# _____ out of 1 for school year 20 ___/20 ___

Name of person conducting drill: LARRY WATERS

Title of person conducting drill: PRINCIPAL

Signature of person conducting drill: 

Fire (fire chief or designee) present Name and Title: _____

**MUST RETURN TO SECURITY OFFICE WITHIN 24 HOURS OF DRILL
FAX NUMBER 866-7112**