

**School Emergency Drills
Documentation Form**

Type of Drill:

Time of Drill:

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

_____ 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: 9/12 Time Drill was held: 10:00 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 2:40

Total Participants: 300 Remarks: _____

This report is for Emergency Drill

Fire# _____	out of 5 for school year 20__ /20__
Tornado# _____	out of 2 for school year 20__ /20__
Shelter IP# _____	out of 1 for school year 20__ /20__
Lockdown# <u>1</u>	out of 2 for school year 20 <u>14</u> /20 <u>15</u>
Cardiac# _____	out of 1 for school year 20__ /20__

Name of person conducting drill: LD Watters

Title of person conducting drill: principal

Signature of person conducting drill: 

~~Fire (fire chief or designee) present~~
Name and Title: Keeey Boardman Security

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