

### 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: Admin/child care

Date of Drill: 10/20/15 Time Drill was held: 10:45 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 2 min 5 sec.

Total Participants: 87 students, 16 staff (child care) Remarks: \_\_\_\_\_

This report is for Emergency Drill

Fire# <u>2</u>	out of 5 for school year 20 <u>15</u> /20 <u>16</u>
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: Jane Downs

Title of person conducting drill: Jane Downs

Signature of person conducting drill: Child Care Director

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

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