

### 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: 3.17.15 Time Drill was held: 10:45 (a.m.) (p.m.)

Exact time required to evacuate/shelter/secure: 10:45 / 10:50 5 min.

Total Participants: 103 students Remarks: preschool only

This report is for Emergency Drill	Fire#	_____	out of 5 for school year 20	____	/20	____
	Tornado#	<u>2</u>	out of 2 for school year 20	<u>14</u>	/20	<u>15</u>
	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	____

Busy Bees ✓ 13  
 Mont ✓ 17  
 meadow 14  
 Pond 14  
 SRP ✓ 16  
 SRP 2 ✓ 16  
 CEPS 18

Name of person conducting drill: Jane Downs

Title of person conducting drill: Child Care Director

Signature of person conducting drill: Jane Downs

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

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