

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

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

9:15

Standard

_____ Tornado Drill (2 required)(1 In March)

Class Change

1 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: 10/8/15

Time Drill was held: 9:15 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 6 MINUTES

Total Participants: 350 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# 1 out of 1 for school year 2015/2016

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

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

Name of person conducting drill: LARRY WATTERS

Title of person conducting drill: PRINCIPAL

Signature of person conducting drill: [Signature]

Fire (fire chief or designee) present Name and Title: NONE

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