

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: River Valley Academy

Date of Drill: 10/20/15

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

Exact time required to evacuate/shelter/secure: 61 seconds

Total Participants: Approx 50 Remarks: _____

This report is for Emergency Drill Fire# 2 out of 5 for school year 2015 /2016

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: Casimir J. Teliczan

Title of person conducting drill: Student Coordinator

Signature of person conducting drill: CASIMIR J TELICZAN

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

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