

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

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

_____ Standard

#1 _____ 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: NRMS

Date of Drill: 9/20/17 Time Drill was held: 1:37 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 3 minutes

Total Participants: 1000 Remarks: _____

This report is for Emergency Drill

Fire#	_____	out of 5 for school year 20__/20__
Tornado#	<u>1</u>	out of 2 for school year 20 <u>17</u> /20 <u>18</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__

Name of person conducting drill: Al Reickard

Title of person conducting drill: Asst. Principal

Signature of person conducting drill: [Signature]

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

*Scanned to
Jena C
9/20/17*

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