

**School Emergency Drills
Documentation Form**

Type of Drill:

Time of Drill:

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

X Standard

X 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: MOR

Date of Drill: 10/18/18 Time Drill was held: 1:00 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 4:57.24

Total Participants: 480 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>18</u> /20 <u>19</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: Blake Bowman

Title of person conducting drill: Principal

Signature of person conducting drill: Blake R. Bowman

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

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