School Emergency Drills Documentation Form

	Type of Drill:		Time of Drill:	
	Fire Drill (5 required)(3 by	12/1)	X	Standard
	Tornado Drill (2 required)(Class Change	
	Shelter in Place (1 required		Recess	
	Lock Down (2 required)(1 p	n 1)	Lunch	
	Cardiac Drill (1 required by 10/31)			
	Name of Reporting School: \(\sigma \sigma \)	eth Pockfo	ro Middle	School
	Date of Drill:			
	Total Participants:			
	Total Farticipants.	Kemarks		
1 = 3 3 = 4et	This report is for Emergency Drill つくう つくう	Fire# Tornado# Shelter IP# Lockdown#	out of 5 for school year out of 2 for school year out of 1 for school year out of 2 for school year	20/20
Gym	741	Cardiac#	out of 1 for school year	20/20
11	Name of person conducting drill: Title of person conducting drill: Signature of person conducting dril	Principal	dorfeilee 2000e	
	Fire (fire chief or designee) present Name and Title:	0.		

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