

**School Emergency Drills
Documentation Form**

Type of Drill:

X Fire Drill (5 required)(3 by 12/1)
_____ Tornado Drill (2 required)(1 in March)
_____ Shelter in Place (1 required)
_____ Lock Down (2 required)(1 prior to Dec 1 & 1 after Jan 1)
_____ Cardiac Drill (1 required by 10/31)

Time of Drill:

X Standard
_____ Class Change
_____ Recess
_____ Lunch

Name of Reporting School:

Rockford High School

Date of Drill:

10/24/24

Time Drill was held:

1:20 (a.m./p.m.)

Exact time required to evacuate/shelter/secure:

5 minutes

Total Participants:

2,000

Remarks:

This report is for Emergency Drill

Fire#

3

out of 5 for school year 2024/2025

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:

Tom Hasford

Title of person conducting drill:

Principal

Signature of person conducting drill:

[Signature]

Fire (fire chief or designee) present

Name and Title:

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