School Emergency Drills Documentation Form

Type of Drill:		<u>Time of Drill</u>	:
Fire Drill (5 required)(3 by 3	12/1)	_X_	Standard
Tornado Drill (2 required)(Class Change	
Shelter in Place (1 required)		Recess	
Lock Down (2 required)(1 p		Lunch	
Name of Reporting School:	Time Drill was h	eld:lO	(a.m./p.m.)
•			
Total Participants: 500+	Remarks: \(\rightarrow\)	student	s + staff
This report is for Emergency Drill	Tornado# o Shelter IP# o	ut of 5 for school yea ut of 2 for school yea ut of 1 for school yea ut of 2 for school yea	r 20/20 r 20/20
Name of person conducting drill: Title of person conducting drill: Signature of person conducting drill	rincipal 1	L	
Fire (fire chief or designee) present Name and Title:	U	,	

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