

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: 11-3-23

Time Drill was held: 1:05 (a.m./p.m.)

Exact time required to evacuate/shelter/secure:

4 minutes

Total Participants: 2,000 Remarks: _____

This report is for Emergency Drill

Fire# 3

out of 5 for school year 2023/2024

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 Hosford

Title of person conducting drill:

Principal

Signature of person conducting drill:

Tom Hosford

Fire (fire chief or designee) present

Name and Title: _____

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