School Emergency Drills Documentation Form

Type of Drill:			Time of Drill:	
Fire Drill (5 required)(3 by 12	2/1)		X	Standard
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 by 10/31)				
Name of Reporting School: Rockford High School				
Date of Drill: 9 · 12 · 23 Time Drill was held: (a.m./p.m.)				
Exact time required to evacuate/shelter/secure:				
Total Participants: Remarks:				
	· 		·	
This report is for Emergency Drill	Fire#	out of 5	for school year 2	2023/2024
•	Tornado#	out of 2	for school year 2	20/20
	Shelter IP#	out of 1	for school year 2	20/20
	Lockdown#	out of 2	for school year 2	20/20
	Cardiac#	out of 1	for school year ?	20/20
	Tom H	ncf	705	
Name of person conducting drill:	1011	03 1	0	
Title of person conducting drill:	Frunci	10		
Signature of person conducting drill:				
Fire (fire chief or designee) present Name and Title:				

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