School Emergency Drills
Documentation Form

Type of Drill:

_____ Fire Drill (5 required)(3 by 12/1)

__X__ 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: 3/20/24 Time Drill was held: 1:00 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 7 minutes

Total Participants: 2,000 Remarks: _____

This report is for Emergency Drill

Fire#_____ out of 5 for school year 20___ /20___

Tornado#__1__ out of 2 for school year 2023/2024

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: TH

Fire (fire chief or designee) present
Name and Title: _____

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

schoolemergencydrill