

TO
Tina 10/2

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

☒ Fire Drill (5 required)(3 by 12/1)☒ 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)Name of Reporting School: Meadow RidgeDate of Drill: 10/2/14 Time Drill was held: 1:45 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: _____

Total Participants: all school Remarks: _____This report is for Emergency Drill Fire# 2 out of 5 for school year 2014/2015Tornado# _____ out of 2 for school year 2014/2015Shelter IP# - out of 1 for school year 2014/2015Lockdown# _____ out of 2 for school year 2014/2015Cardiac# _____ out of 1 for school year 2014/2015Name of person conducting drill: Blake BowmanTitle of person conducting drill: PrincipalSignature of person conducting drill: Blake R. Bowman

Fire (fire chief or designee) present

Name and Title: _____

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