

**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

X _____ 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: PARKSIDE ELEMENTARY

Date of Drill: 10/6/14

Time Drill was held: 1:10 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: NONE (1:10-1:20)

Total Participants: 300+

Remarks: _____

This report is for Emergency Drill

Fire# _____

out of 5 for school year 20__/20__

Tornado# _____

out of 2 for school year 20__/20__

Shelter IP# ✓

out of 1 for school year 2014/2015

Lockdown# _____

out of 2 for school year 20__/20__

Cardiac# _____

out of 1 for school year 20__/20__

Name of person conducting drill: LARRY WATERS

Title of person conducting drill: PRINCIPAL

Signature of person conducting drill: [Signature]

Fire (fire chief or designee) present

Name and Title: NONE

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