## 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:	PANCSIDE			<b>VIII</b>
Date of Drill: 9/15/14  Exact time required to evacuate/she				(a.m./p.m.)
•				<del></del>
Total Participants:	Remarks:	<del></del>		
This report is for Emergency Drill	Fire#	out of 5	for school year	20 14 /20 15
	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 2	20/20
	Cardiac#	out of 1	for school year	20/20
Name of person conducting drill;	L.D. W	atter	5	
Title of person conducting drill:	FOR	att	us pr	inapol
Signature of person conducting drill:	7	ph	'	
Fire (fire chief or designee) present Name and Title:	1a -			

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