

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: Administration - Child CareDate of Drill: 11.5.15 ^{rescheduled from} 11.4.15 Time Drill was held: 9:00 am (a.m./p.m.)Exact time required to evacuate/shelter/secure: 1 min 50 sec.Total Participants: 85 students Remarks: _____

This report is for Emergency Drill

Fire# 3out of 5 for school year 2015/2016

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 20____/20____

Cardiac# _____

out of 1 for school year 20____/20____

Name of person conducting drill: Jane DownsTitle of person conducting drill: Child Care DirectorSignature of person conducting drill: Jane Downs

Fire (fire chief or designee) present

Name and Title: _____

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