

**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: East Rockford Middle School

Date of Drill: 10-9-15 Time Drill was held: 9:30 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 1:51 (CPB started in 59 sec.)

Total Participants: 17 Remarks: Linda B. monitored this drill.

Responders were on the scene quickly.
(More assessment of the scene next time)

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 20__/20__

Lockdown# _____ out of 2 for school year 20__/20__

Cardiac# 1 out of 1 for school year 2015/2016

Name of person conducting drill: Jeremy Karel

Title of person conducting drill: Assistant Principal

Signature of person conducting drill: [Signature]

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

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