

School Emergency Drills Documentation Form

Type of Drill:

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Fire Drill (6 required)

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Tornado Drill (2 required)

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Shelter in Place (2 required)

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Lock Down (2 required 1 prior to Nov. 1)

Time of Drill:

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Standard

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Class Change

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Recess

Name of Reporting School: ERMS

Date of Drill: 9/3/14

Time Drill was held: 7:45 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 3:34

Total Participants: ~ 950

Remarks: _____

This report is for Emergency Drill # 1 for school year 2014-15

Name of person conducting drill: Kelly Amshey

Title of person conducting drill: ~~Asst~~ Asst Principal

Signature of person conducting drill: Kelly Amshey

Drill was coordinated with:

____ Emergency Management Coordinator
Name and Title: _____

AND

____ Law Enforcement (county sheriff or chief of police or designee or MSP)
Name and Title: _____

OR

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

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