

School Emergency Drills Documentation Form

Type of Drill:

X Fire Drill (5 required) (3 by 12/1)
_____ Tornado Drill (2 required) (1 in March)
_____ Shelter in Place (1 required)
_____ Lock Down (2 required) (1 prior to Dec 1 & 1 after Jan 1)
_____ Cardiac Drill (1 required)

Time of Drill:

X Standard
_____ Class Change
_____ Recess
_____ Lunch

Name of Reporting School: Lakes Elementary

Date of Drill: Thursday, September 10, 2015 Time Drill was held: 1:00 PM

Exact time required to evacuate/shelter/secure: 2 minutes, 24 seconds

Total Participants: 510

Remarks: _____

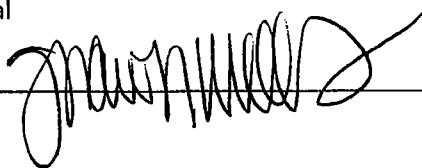
This report is for Emergency Drill

Fire# 1	out 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: Sharon Wells

Title of person conducting drill: Principal

Signature of person conducting drill: _____



Fire (fire chief or designee) present

Name and Title: _____

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