

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

_____ Fire Drill (5 required)(3 by 12/1)

Standard

2 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: Lakes Elementary

Date of Drill: Thurs. March 12, 2015 Time Drill was held: 10:00 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 2 min. 16 sec.

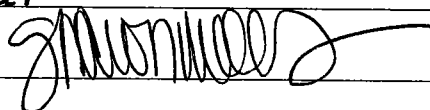
Total Participants: 421 students Remarks: 1st grade on Field Trip at the time of drill.

This report is for Emergency Drill	Fire# _____	out of 5 for school year 20__ /20__
	Tornado# <u>2</u>	out of 2 for school year 20 <u>14</u> /20 <u>15</u>
	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**