

**School Emergency Drills
Documentation Form**

Type of Drill:

Time of Drill:

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

X

Standard

_____ Tornado Drill (2 required) (1 in March)

Class Change

X 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: Rockford Freshman Center

Date of Drill: 11/13/15

Time Drill was held: 12:30 (a.m. p.m.)

Exact time required to evacuate/shelter/secure: 4:00 mins.

Total Participants: 700 Remarks: _____

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# 1

out of 2 for school year 2015/2016

Lockdown# _____

out of 2 for school year 20__/20__

Cardiac# _____

out of 1 for school year 20__/20__

Name of person conducting drill: Tom Hasford

Title of person conducting drill: Principal

Signature of person conducting drill: [Signature]

Fire (fire chief or designee) present

Name and Title: [Signature]