School Emergency Drills Documentation Form

Type of Drill:		Time of Drill:	
Fire Drill (5 required)(3 by 12/1)		1	Standard
Tornado Drill (2 required)(1 in March)			Class Change
Shelter in Place (1 required)			Recess
Lock Down (2 required)(1 pri	1)	Lunch	
Cardiac Drill (1 required)			
Name of Reporting School: Date of Drill: ##############################			
Exact time required to evacuate/she	Hartsasure: 3:0	+	
Total Participants: 7/6	Remarks:		
This report is for Emergency Drill	Fire# Tornado# Shelter IP# Lockdown# Cardiac#	out of 5 for school year out of 2 for school year out of 1 for school year out of 2 for school year out of 1 for school year	r 20 <u>/4</u> /20 <u>/5</u> r 20/20 r 20/20
Name of person conducting drill: Title of person conducting drill: Signature of person conducting dr	Principal III: BX G	gerland	my -
Fire (fire chief or designee) preser Name and Title:			

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