

**School Emergency Drills
Documentation Form**Type of Drill:Time of Drill:☐ Fire Drill (5 required)(3 by 12/1)☒

Standard

☐ 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: River Valley AcademyDate of Drill: 9/26/16 Time Drill was held: 9:16 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: _____

Total Participants: _____ 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# _____ out of 1 for school year 20____/20____

Lockdown# 1 out of 2 for school year 2016/2017

Cardiac# _____ out of 1 for school year 20____/20____

Name of person conducting drill: Lisa JacobsTitle of person conducting drill: Executive DirectorSignature of person conducting drill: [Signature]

Fire (fire chief or designee) present

Name and Title: Brian Baeumler P50 #35 [Signature]**MUST RETURN TO SECURITY OFFICE WITHIN 24 HOURS OF DRILL
FAX NUMBER 866-7112**