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 pr		Lunch	
Cardiac Drill (1 required)			
Name of Reporting School: MRMS			
Date of Drill: 11/3/16 Time Drill was held: 1:40 (a.m.(p.m.) Exact time required to evacuate/shelter/secure: 1:44 pm.			
Total Participants: 950 + Remarks:			
rotal Participants: FO Remarks:			
This report is for Emergency Drill	Fire# Tornado# Shelter IP# Lockdown# 2 Cardiac#		20/20 20/20 20 <u> </u>
Name of person conducting drill: $AL + E(CAAR)$			
Title of person conducting drill: ASST - PRINCIPAL			
Signature of person conducting drill:			
Fire (fire chief or designee) present Name and Title: ASN Bradler P. S. O			

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