

**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: ERMS

Date of Drill: 5.18.17 Time Drill was held: 10:00 (a.m.) p.m.)

Exact time required to evacuate/shelter/secure: 4 min.

Total Participants: 797± Remarks: _____

This report is for Emergency Drill Fire# 4 out of 5 for school year 2016/2017

Tornado# _____ out of 2 for school year 20____/20____

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: Shannon Ouellette

Title of person conducting drill: Assistant Principal

Signature of person conducting drill: Shannon Ouellette

Fire (fire chief or designee) present

Name and Title: _____

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