

**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: Rockford Freshman Center

Date of Drill: 8/30/17 Time Drill was held: 9:00 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 2:30

Total Participants: 680 Remarks: \_\_\_\_\_

This report is for Emergency Drill

Fire#	<u>1</u>	out of 5 for school year 20 <u>17</u> /20 <u>18</u>
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: Tom Hosford

Title of person conducting drill: Principal

Signature of person conducting drill: \_\_\_\_\_

Fire (fire chief or designee) present

Name and Title: \_\_\_\_\_

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