## School Emergency Drills Documentation Form

Type of Drill:		<u>Time of D</u>	<u>rill</u> :
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 p	n 1)	Lunch	
Cardiac Drill (1 required)			
Name of Reporting School: Lakes Elementary			
Date of Drill: 11:12:17 Time Drill was held: 11:00 (a.m./p.m.)  Exact time required to evacuate/shelter/secure: 1:51			
Total Participants: Remarks:			
Total Farticipants.	Remarks:		
This report is for Emergency Drill	Fire# Tornado#	out of 5 for school year 20/20 out of 2 for school year 20/20	
	Shelter IP#	out of 1 for school ye	ear 20/20
	Lockdown#	out of 2 for school ye	ear 20/20
	Cardiac#	out of 1 for school ye	ear 20/20
Name of person conducting drill:	Sprot Wells		
Title of person conducting drill:			
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