

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

_____ Fire Drill (5 required)(3 by 12/1)

X Standard

_____ Tornado Drill (2 required)(1 in March)

_____ Class Change

_____ Shelter in Place (1 required)

_____ Recess

X Lock Down (2 required)(1 prior to Dec 1 & 1 after Jan 1)

_____ Lunch

_____ Cardiac Drill (1 required)

Name of Reporting School: PARKSIDE ELEMENTARY

Date of Drill: 3/15/18 Time Drill was held: 10:00 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 3 minutes

Total Participants: 350 + 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#	<u>X</u>	out of 2 for school year 20 <u>17</u> /20 <u>18</u>
Cardiac#	_____	out of 1 for school year 20__ /20__

Name of person conducting drill: LARRY WATTERS

Title of person conducting drill: PRINCIPAL

Signature of person conducting drill: [Signature]

Fire (fire chief or designee) present
Name and Title: none

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