

**School Emergency Drills
Documentation Form**

Type of Drill:

Time of Drill:

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

1:10

Standard

X 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: PARKSIDE ELEMENTARY

Date of Drill: 3/4/19

Time Drill was held: 1:10 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 1 MIN. 4 MINUTES

Total Participants: 350 +

Remarks: _____

This report is for Emergency Drill

Fire# _____ out of 5 for school year 20__ /20__

Tornado# 2 out of 2 for school year 2019/2020

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: LARRY WATTERS

Title of person conducting drill: PRINCIPAL

Signature of person conducting drill: _____

Fire (fire chief or designee) present

Name and Title: ROPS Police

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