

**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: River Valley Academy

Date of Drill: 10-16-18

Time Drill was held: 10:45 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 65 seconds

Total Participants: 45 Remarks: _____

This report is for Emergency Drill

| | |
|-------------------|---|
| Fire# _____ | out of 5 for school year 20__ /20__ |
| Tornado# <u>1</u> | out of 2 for school year 20 <u>18</u> /20 <u>19</u> |
| 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: Sarah Kerrish

Title of person conducting drill: Secretary

Signature of person conducting drill: Sarah Kerrish

Fire (fire chief or designee) present
Name and Title: Jacob Poe (officer)

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