

**School Emergency Drills
Documentation Form**

Type of Drill:

☒ Fire Drill (5 required)(3 by 12/1)

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

☐ Shelter in Place (1 required)

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

☐ Cardiac Drill (1 required by 10/31)

Time of Drill:

☒ Standard

☐ Class Change

☐ Recess

☐ Lunch

Name of Reporting School: North Rockford m.s.

Date of Drill: 9/20/19 Time Drill was held: 8:48 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: _____

Total Participants: 1000 Remarks: _____

This report is for Emergency Drill

Fire# <u>2</u>	out of 5 for school year 20 <u>19</u> /20 <u>20</u>	<u>Clear</u>
Tornado# _____	out of 2 for school year 20____/20____	<u>849</u>
Shelter IP# _____	out of 1 for school year 20____/20____	<u>850</u>
Lockdown# _____	out of 2 for school year 20____/20____	<u>851</u>
Cardiac# _____	out of 1 for school year 20____/20____	<u>Gym 851</u>

Name of person conducting drill: Al Reickard

Title of person conducting drill: Asst Principal

Signature of person conducting drill: [Signature]

Fire (fire chief or designee) present

Name and Title: OFF. BRANDON BOELEMA #35

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