

1/14/2021

**School Emergency Drills
Documentation Form**

Type of Drill:

Time of Drill:

X Fire Drill (5 required)(3 by 12/1) #3

10:15 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 by 10/31)

Name of Reporting School: Cannonsburg Elementary

Date of Drill: 1/14/2021 Time Drill was held: _____ (a.m./p.m.)

Exact time required to evacuate/shelter/secure: Individual Classes

Total Participants: _____ Remarks: Reviewed what was
needed to be completed for success

This report is for Emergency Drill

Fire# 3 out of 5 for school year 2020 /2021

Tornado# _____ out of 2 for school year 20____/20____

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: Matthew Zokoe

Title of person conducting drill: Principal

Signature of person conducting drill: Matthew Zokoe

Fire (fire chief or designee) present

Name and Title: _____

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