## School Emergency Drills Documentation Form

Type of Drill:		<u>Time of D</u>	<u>rill</u> :
Fire Drill (5 required)(3 by 12/1)		V	Standard
Tornado Drill (2 required)(		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:	- Polison Mr.	VJ4 School	
Date of Drill: 9-28-23 Time Drill was held: 1:40 (a.m./p.m.)  Exact time required to evacuate/shelter/secure: 2:55			
Total Participants: \$37			
This report is for Emergency Drill	Lockdown#	out of 5 for school y out of 2 for school y out of 1 for school y out of 2 for school y out of 1 for school y	ear 20/20 ear 20/20 ear 20/20
Name of person conducting drill:	Jesus Son	1.llar	
Title of person conducting drill: ASST Principles			
Signature of person conducting drill:			
Fire (fire chief or designee) present Name and Title:			

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