School Emergency Drills

Documentation Form

Type of Drill			Time of Drill	
Fire Drill (5 required)Tornado Drill (2 required)Lock Down/Shelter in Place Dr(2 required)	ill		Standard Class Change Recess Other Events	
Name of reporting school:				
Date of drill:	Time drill was held:			_ (pm/am)
Exact time required to evacuate/shelt	ter/secure:			
Total participants:				
Remarks:				
This report is for emergency drill #	for school ye	ar	·	
Name of person conducting drill:				
Title of person conducting drill:) //	
Title of person conducting drill: Signature of person conducting drill:	James	4	mth)
Drill Was Coordinated With:	,			
County/Local Emergency Mar Name & Title				
AND				
Law Enforcement (county she Name & Title		-	-	
OR				
Fire (fire chief or designee) Name & Title				