

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

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

9:30

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

Name of Reporting School: _____

Date of Drill: 10-24-24

Time Drill was held: 9:30 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 2:58

Total Participants: 481 Remarks: _____

This report is for Emergency Drill Fire# 3 out of 5 for school year 2024/2025

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__

Name of person conducting drill: Shannon Ouellette

Title of person conducting drill: Principal

Signature of person conducting drill: Shannon Ouellette

Fire (fire chief or designee) present
Name and Title: _____

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