

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

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

_____ 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: North Rockford Middle School

Date of Drill: 10/7/24 Time Drill was held: 8:43 (o a.m./p.m.)

Exact time required to evacuate/shelter/secure: _____

Total Participants: 900+ Remarks: _____

This report is for Emergency Drill

Fire# _____ out of 5 for school year 20__/20__

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

Shelter IP# _____ out of 1 for school year 20__/20__

Lockdown# 1 out of 2 for school year 2024/2025

Cardiac# _____ out of 1 for school year 20__/20__

6th - 856
1st - 854
2nd - 858
3rd - 855
tech - 854
music - 858
gym - 858
tunnel - 858

Name of person conducting drill: Lissa Weidenfeller

Title of person conducting drill: Principal

Signature of person conducting drill: _____

Fire (fire chief or designee) present

Name and Title: Mitchell Lutz - Firefighter

MUST RETURN TO SECURITY OFFICE WITHIN 24 HOURS OF DRILL

FAX NUMBER 866-7112

403
406 404 in operation

* called
off e 9:03

schoolemergencydrill