

**School Emergency Drills
Documentation Form**

Type of Drill:

Time of Drill:

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

k 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: _____

Valley View

Date of Drill: _____

9/10/24

Time Drill was held: _____

10:00

(a.m./p.m.)

Exact time required to evacuate/shelter/secure: _____

1:00 min

Total Participants: _____

400

Remarks: _____

This report is for Emergency Drill

Fire#

1

out of 5 for school year 20

24/25

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: _____

Jeremy Karel

Title of person conducting drill: _____

Principal

Signature of person conducting drill: _____

J. Karel

Fire (fire chief or designee) present

Name and Title: Mitchell Luss - Firefighter

Mitchell

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