

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

4 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: East Brunswick Middle School

Date of Drill: 11-30-22 Time Drill was held: 12:30 (a.m./p.m.)

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

Total Participants: 780 Remarks: _____

This report is for Emergency Drill

Fire# <u>4</u>	out of 5 for school year <u>2022</u> / <u>2023</u>
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: Adam Burkholder

Title of person conducting drill: Principal

Signature of person conducting drill: [Signature]

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

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