

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: Lakes Elementary

Date of Drill: 10/20/22

Time Drill was held: 12:50 (a.m./p.m.)

Exact time required to

evacuate/shelter/secure: 5:57

Total Participants: 540

Remarks: _____

This report is for Emergency Drill

Fire# 3

out of 5 for school year 2022 /2023

Tornado# _____

out of 2 for school year 20__/20__

Shelter IP# _____

out of 1 for school year 20__/20__

Lockdown# 0

out of 2 for school year 20__/20__

Cardiac# _____

out of 1 for school year 20__/20__

Name of person conducting drill: Mindy McGinn

Title of person conducting drill: Principal

Signature of person conducting drill: 

Fire (fire chief or designee) present

Name and Title: _____

MUST RETURN TO SECURITY OFFICE WITHIN 24 HOURS OF DRILL

FAX NUMBER 866-7112