

**School Emergency Drills
Documentation Form**

Type of Drill:

Time of Drill:

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

 X Standard

 X 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)

Name of Reporting School: Parkside Elementary

Date of Drill: 3/6/23 Time Drill was held: 1:10 (a.m./ p.m.)

Exact time required to evacuate/shelter/secure: 1:31

Total Participants: 334 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# _____	out of 2 for school year 20__/20__
Cardiac# _____	out of 1 for school year 20__/20__

Name of person conducting drill: Larry Watters

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**