

**School Emergency Drills
Documentation Form**

Type of Drill:

- Fire Drill (5 required)(3 by 12/1)
- Tornado Drill (2 required)(1 in March)
- Shelter in Place (1 required)
- Lock Down (2 required)(1 prior to Dec 1 & 1 after Jan 1)
- Cardiac Drill (1 required by 10/31)

Time of Drill:

- Standard
- Class Change
- Recess
- Lunch

Name of Reporting School: _____ Rockford Freshman Center _____

Date of Drill: _____ 9/22/2022 _____ Time Drill was held: _____ 1:20 _____ (a.m./p.m.)

Exact time required to evacuate/shelter/secure: _____ 2.43 min _____

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

Name of person conducting drill: _____ Derek Dillon _____

Title of person conducting drill: _____ Asst 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**