

# 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

X  Lock Down (2 required) (1 prior to Dec 1 & 1 after Jan 1)

X  Lunch

\_\_\_\_\_ Cardiac Drill (1 required by 10/31)

Name of Reporting School: \_\_\_\_\_ Rockford Freshman Center \_\_\_\_\_

Date of Drill: \_\_\_\_\_ 9/15/2022 \_\_\_\_\_ Time Drill was held: \_\_\_\_\_ 11:50 \_\_\_\_\_ (a.m./p.m.)

Exact time required to evacuate/shelter/secure: \_\_\_\_\_ 4:06 \_\_\_\_\_

Total Participants: \_\_\_\_\_ ALL \_\_\_\_\_ 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#  2  out of 2 for school year 20\_\_ 22\_\_ /2023\_\_

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**