

School Emergency Drills Documentation Form

Type of Drill:

4/5 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)

Time of Drill:

~~_____~~ Standard

_____ Class Change

_____ Recess

Lunch

Name of Reporting School: East Rockford Middle School

Date of Drill: 12-6-23 Time Drill was held: 11:10 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 2.53

Total Participants: 852 Remarks: _____

This report is for Emergency Drill Fire# 4 out of 5 for school year 2023/2024

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__

Name of person conducting drill: Joseph Santillan

Title of person conducting drill: Asst 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**