

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

<input type="checkbox"/> Fire Drill (5 required)(3 by 12/1)	<input checked="" type="checkbox"/> Standard
<input type="checkbox"/> Tornado Drill (2 required)(1 in March)	<input type="checkbox"/> Class Change
<input checked="" type="checkbox"/> Shelter in Place (1 required)	<input type="checkbox"/> Recess
<input type="checkbox"/> Lock Down (2 required)(1 prior to Dec 1 & 1 after Jan 1)	<input type="checkbox"/> Lunch
<input type="checkbox"/> Cardiac Drill (1 required by 10/31)	

Name of Reporting School: Meadow Tidge

Date of Drill: 2/8/24 Time Drill was held: 1:20 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 5: minutes

Total Participants: 513 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# <u>1</u>	out of 1 for school year 20 <u>23</u> /20 <u>24</u>
Lockdown# _____	out of 2 for school year 20__ /20__
Cardiac# _____	out of 1 for school year 20__ /20__

Name of person conducting drill: Blake Bowman

Title of person conducting drill: Principal

Signature of person conducting drill: Blake Bowman

Fire (fire chief or designee) present
Name and Title: Not applicable

**MUST RETURN TO SECURITY OFFICE WITHIN 24 HOURS OF DRILL
FAX NUMBER 866-7112**