

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

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

Lunch

Cardiac Drill (1 required by 10/31)

Name of Reporting School: Rockford High School

Date of Drill: 10/24/24 Time Drill was held: 1:20 (a.m./p.m.)

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

Total Participants: 2,000 Remarks: _____

This report is for Emergency Drill

Fire#	<u>3</u>	out of 5 for school year 20 <u>24</u> /20 <u>25</u>
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: Tom Hasford

Title of person conducting drill: 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**