

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: River Valley

Date of Drill: 10/22/24 Time Drill was held: 9:30 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: _____

Total Participants: Approx 30 Remarks: _____

This report is for Emergency Drill

Fire# <u>2</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: Cecily Walczuska

Title of person conducting drill: Admin Assistant

Signature of person conducting drill: [Signature]

Fire (fire chief or designee) present
Name and Title: Chad Peckham # / Firefighter

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