

School Emergency Drills Documentation Form

Type of Drill:

Time of Drill:

_____ Fire Drill (5 required)(3 by 12/1)

__X__ Standard

__X__ 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: ___Lakes Elementary_____

Date of Drill: ___3/9/2023___

Time Drill was held: _11:03am_(a.m./p.m.)

Exact time required to evacuate/shelter/secure: 5 minutes to check and clear as secure

Total Participants: _557_____

Remarks: _Students and staff assumed their positions. Office personnel went room by room to clear and review proper positioning. 4 substitute teachers.

This report is for Emergency Drill Fire#_____ out of 5 for school year 2022/2023

Tornado# __1__ out of 2 for school year 2022/2023

Shelter IP#_____ out of 1 for school year 2022/2023

Lockdown#_____ out of 2 for school year 2022/2023

Cardiac#_____ out of 1 for school year 2022/2023

Name of person conducting drill: ___Mindy McGinn_____

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**