

**School Emergency Drills
Documentation Form**

Type of Drill:

X 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:

8 Standard

_____ Class Change

_____ Recess

_____ Lunch

Name of Reporting School: Valley View

Date of Drill: 10-3-22 Time Drill was held: 1:15 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 3: min

Total Participants: 700 Remarks: _____

This report is for Emergency Drill

Fire#	<u>2</u>	out of 5 for school year 20 <u>22</u> /20 <u>23</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: K. Michel

Title of person conducting drill: Admin Assistant

Signature of person conducting drill: Karen Michel

Fire (fire chief or designee) present
Name and Title: _____

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