

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:

East Rockford Middle School

Date of Drill:

1-26-24

Time Drill was held:

9:40 (a.m./p.m.)

Exact time required to evacuate/shelter/secure:

3 minutes

Total Participants:

852

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# 1

out of 1 for school year 2023/2024

Lockdown# _____

out of 2 for school year 20__/20__

Cardiac# _____

out of 1 for school year 20__/20__

Name of person conducting drill:

Leslie Sant'Ana

Title of person conducting drill:

Asst. Principal

Signature of person conducting drill:

[Signature]

Fire (fire chief or designee) present

Name and Title: _____

MUST RETURN TO SECURITY OFFICE WITHIN 24 HOURS OF DRILL

FAX NUMBER 866-7112