School Emergency Drills Documentation Form

Type of Drill:		Time of Drill:	Time of Drill:	
Fire Drill (5 required)(3 by	12/1)	<u>X</u>	Standard	
Tornado Drill (2 required)(Class Change		
Shelter in Place (1 required		Recess		
Lock Down (2 required)(1 p		Lunch		
Name of Reporting School: R_0 Date of Drill: R_0 Exact time required to evacuate/sh Total Participants: S_0	23 Time Drill was held elter/secure:	:10:35 0	(a.m.)p.m.)	
This report is for Emergency Drill	1		ar 20 <u>23</u> /20 <u>24</u> ar 20/20	
Name of person conducting drill:	ministrative	eya Cot Assistant	ter Principal Leyn Cotter	

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