

School Emergency Drills Documentation Form

<input type="checkbox"/>	Fire Drill (6 required)
<input type="checkbox"/>	Tornado Drill (2 required)
<input checked="" type="checkbox"/>	Lock Down/Shelter in Place Drill (2 required)

<input type="checkbox"/>	Standard
<input type="checkbox"/>	Class Change
<input type="checkbox"/>	Recess
<input type="checkbox"/>	Other Events

Name of reporting school: Chickering

Date of drill: 4/28/16

Time drill was held: 1:35 AM/PM

Exact time required to evacuate / shelter / secure: 3 mins 15 sec

Total Participants: 134 students 20 adults

Remarks: _____

This report is for emergency drill # _____ for school year 2015-2016

Name of person conducting drill: Heidi Clark

Title of the person conducting the drill: Principal

Signature of person conducting the drill: _____

Drill was coordinated with _____

Emergency Management Coordinator
Name & Title
Signature

AND

Law Enforcement (county sheriff or chief of police or designee or MSP)
Name & Title
Signature

Todd Taylor Chief of Police

OR

Fire (fire chief or designee)
Name & Title
Signature

Mike Davidson Fire Chief

Mike Aguirre
Paul Kern CTPP