

School Emergency Drills

Documentation Form

Type of Drill

- ☐ Fire Drill (5 required)
- ☐ Tornado Safety Drill (2 required)
- ☐ Shelter in Place Drill
- ☐ Lockdown (3 required)

Type of Drill

- ☐ Standard
- ☐ Class Change
- ☐ Recess
- ☐ Other Events

Name of Reporting School: _____

Name of person conducting drill: _____

Title of person conducting drill: _____

Date of Drill: _____ Time drill was held: _____ ☐ AM ☐ PM

Exact time required to evacuate/shelter/secure: _____

Total Participants: _____

This report is for emergency drill # _____ for school year _____.

Remarks:

Drill was coordinated with:

- ☒ Emergency Management Coordinator
Name & Title: Curtis Parsons, Lenawee Co. Emergency Mgt. Coord.

AND

- ☐ Law Enforcement (county sheriff or chief of police or designee or MSP)
Name & Title: _____

OR

- ☐ Fire (fire chief or designee)
Name & Title: _____

Principal's signature _____