



School Emergency Drills Documentation Form

Type of Drill

- Fire Drill (5 required)
- Tornado Drill (2 required)
- Lockdown Drill (3 required)

Time of Drill

- Standard
- Class Change
- Recess
- Other Events

Name of reporting School: Kenowa Hills Early Childhood Center

Date of Drill: _____ Time drill was held: _____

Exact time required to evacuate/shelter/secure: _____

Total participants: _____

Remarks: _____

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

Name of person conducting the drill: _____

Title of person conducting the drill: _____

Signature of person conducting the drill:

Drill was Coordinated with: _____
County/Local Emergency Management Coordinator or designee
Name and Title: _____

And

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

Or

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