

School Emergency Drills Documentation Form

Type of Drill

- Fire Drill (5 required, three by Dec. 1)
- Tornado Drill (2 required, 1 in March)
- Lock Down/Shelter in Place Drill (3 required, one by Dec. 1 and one after Jan 1.)

Time of Drill*

- Standard
- Class Change
- Recess
- Other Events

*One drill must occur during a transition time

Name of Reporting School: _____ Haynor School _____

Date of Drill: _____ 5/24/16 _____ Time drill was held: _____ 12:48 _____ (pm/am)

Exact time required to evacuate/shelter/secure: _____ 1 Minute 2 Seconds _____

Total Participants: _____ 32 _____

Remarks: _____

This report is for emergency drill # ___?___ for school year ___15/16___.

Name of person conducting drill: _____ Kelsey Jones _____

Title of person conducting drill: _____ Teacher _____

Signature of person conducting drill: _____ *Kelsey Jones* _____

Drill Was Coordinated With:

- Emergency Management Coordinator
Name & Title: Doug Devries, Deputy Emergency Management Director

Submit schedule* of drills by September 15

emd@ioniacounty.org

*Notify the Emergency Management Director if there are any changes to the schedule. If a drill is cancelled, it must be rescheduled within 10 days

A copy of this form must be posted onto the school's website within 30 days of the drill and remain on the site for 3 years.