School Emergency Drills Documentation Form

Type of Drill		<u>Time of Drill</u>	
<u> </u>	Fire Drill (5 required) Tornado Drill (2 required) Lock Down/Shelter in Place Drill (3 required)		Standard Class Change Recess Other Events
Name of	Reporting School:		
Date of D	Orill: Time drill was	s held:	(pm/am)
Exact tim	e required to evacuate/shelter/secure: _		
Total Par	ticipants:		
Remarks	:		
This repo	ort is for emergency drill #for scho	ol year	
Name of	person conducting drill:		
Title of pe	erson conducting drill:		
Signature	e of person conducting drill:	Sen	
Drill Was	Coordinated With:		
	Emergency Management Coordinator Name & Title		
	AND		
	Law Enforcement (county sheriff or chick Name & Title		
	OR		
	Fire (fire chief or designee) Name & Title		

Please FAX to Berrien County Emergency Management at 269-934-9023