WARREN CONSOLIDATED SCHOOLS
EMERGENCY DRILLS DOCUMENTATION FORM
_____ School Year

TYPE OF DRILL	**TIME OF DRILL**
☑ Fire Drill – ***5 required*** **Conduct one prior to 12/1***	☑ Standard
☐ Tornado (Take Shelter) Drill – ***2 required*** **Conduct one at the beginning of 1st sem. and beginning of 2nd sem.***	☐ Class Change
☐ Lock Down – ***3 required*** **Conduct one prior to 12/1***	☐ Recess
☐ AED/Cardiac Event	☐ Other Events (e.g. Lunch)
☐ Other (e.g. bus evac.)	

Mandatory Drills ***Mandated by changes to the school code**

Name of Reporting School Wilkerson

Date of Drill 4-26-19 Time drill was held 2:30

Exact time required to evacuate/shelter/secure 2 m 19 s

Total Participants Approx. 550 adults and children

Remarks_____

_____

_____

Total required drills complete to date _____

Name and title of person conducting drill Anthony Viviano

Signature of person conducting drill [signature]

Drill was coordinated with:

☐ Emergency Manager/Fire/Police

Name and Title _____

☑ Drill Submitted Electronically Date 4-26-19