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 angus elementary

Date of Drill 3/5/2019 Time drill was held 10:30

Exact time required to evacuate/shelter/secure 5:29

Total Participants 439

Remarks_____

Total required drills complete to date 8

Name and title of person conducting drill Jason Clark

Signature of person conducting drill

Drill was coordinated with:

☐ Emergency Manager/Fire/Police

Name and Title _____

☑ Drill Submitted Electronically Date 4/16/19