

## SCHOOL DRILL DOCUMENTATION

DISTRICT NAME AND NUMBER					SCHOOL NAME					PRINCIPAL IN CHARGE				
<b>DRILL TYPE</b>		<b>INCIDENT TYPE</b>			<b>SIMULATED CONDITION</b>			<b>DATE</b>			<b>TIME</b>			
EVACUATION 1		FIRE												
Initials of Key School Participants and Backups					Evaluation of Drill Objectives (Check "S" for satisfactory or "I" for improvement(s) needed.)									
Discovery	Leader	Monitor	Spokesperson	Recorder	Notification Effectiveness	Planned Response Understood	Movement to Safe Area	First Responder Communication	Accounting for Occupants					
					<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I
Local Fire Official Present? <input type="checkbox"/> Yes <input type="checkbox"/> No					Local Fire Official's Initials to certify that a school evacuation drill was conducted while present _____									

<b>DRILL TYPE</b>		<b>INCIDENT TYPE</b>			<b>SIMULATED CONDITION</b>			<b>DATE</b>			<b>TIME</b>			
EVACUATION 2		FIRE												
Initials of Key School Participants and Backups					Evaluation of Drill Objectives (Check "S" for satisfactory or "I" for improvement(s) needed.)									
Discovery	Leader	Monitor	Spokesperson	Recorder	Notification Effectiveness	Planned Response Understood	Movement to Safe Area	First Responder Communication	Accounting for Occupants					
					<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I
Local Fire Official Present? <input type="checkbox"/> Yes <input type="checkbox"/> No					Local Fire Official's Initials to certify that a school evacuation drill was conducted while present _____									

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EVACUATION 3		FIRE												
Initials of Key School Participants and Backups					Evaluation of Drill Objectives (Check "S" for satisfactory or "I" for improvement(s) needed.)									
Discovery	Leader	Monitor	Spokesperson	Recorder	Notification Effectiveness	Planned Response Understood	Movement to Safe Area	First Responder Communication	Accounting for Occupants					
					<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I
Local Fire Official Present? <input type="checkbox"/> Yes <input type="checkbox"/> No					Local Fire Official's Initials to certify that a school evacuation drill was conducted while present _____									

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BUS EVACUATION 1														
Initials of Key School Participants and Backups					Evaluation of Drill Objectives (Check "S" for satisfactory or "I" for improvement(s) needed.)									
Discovery	Leader	Monitor	Spokesperson	Recorder	Notification Effectiveness	Planned Response Understood	Movement to Safe Area	First Responder Communication	Accounting for Occupants					
					<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I
Drill accounted for in Curriculum? <input type="checkbox"/> Yes <input type="checkbox"/> No					Curriculum includes instruction safe bus riding practices for all students? <input type="checkbox"/> Yes <input type="checkbox"/> No									

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SHELTER IN PLACE 1		TORNADO												
Initials of Key School Participants and Backups					Evaluation of Drill Objectives (Check "S" for satisfactory or "I" for improvement(s) needed.)									
Discovery	Leader	Monitor	Spokesperson	Recorder	Notification Effectiveness	Planned Response Understood	Movement to Safe Area	First Responder Communication	Accounting for Occupants					
					<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I
Local First Responder Present? <input type="checkbox"/> Yes <input type="checkbox"/> No					Local First Responder's Initials to certify that a shelter-in-place drill was conducted while present _____									

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LAW ENFORCEMENT 1		SHOOTING												
Initials of Key School Participants and Backups					Evaluation of Drill Objectives (Check "S" for satisfactory or "I" for improvement(s) needed.)									
Discovery	Leader	Monitor	Spokesperson	Recorder	Notification Effectiveness	Planned Response Understood	Movement to Safe Area	First Responder Communication	Accounting for Occupants					
					<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I	<input type="checkbox"/> S <input type="checkbox"/> I
Local Law Enforcement Present? <input type="checkbox"/> Yes <input type="checkbox"/> No					Local Law Enforcement's Initials to certify that a school lockdown drill was conducted while present _____									

CC: Appropriate Regional Superintendent or OSFM if non-public school