

**School Emergency Drills  
Documentation Form**

Type of Drill:

Time of Drill:

- |  |       |              |
|--|-------|--------------|
| <input checked="" type="checkbox"/> Fire Drill (5 required)(3 by 12/1) | _____ | Standard     |
| _____ Tornado Drill (2 required)( 1 in March)                          | _____ | Class Change |
| _____ Shelter in Place (1 required)                                    | _____ | Recess       |
| _____ Lock Down (2 required)(1 prior to Dec 1 & 1 after Jan 1)         | _____ | Lunch        |
| _____ Cardiac Drill (1 required by 10/31)                              |       |              |

Name of Reporting School: Rockford High School

Date of Drill: 10/30 Time Drill was held: 1:25 (a.m./p.m.)

Exact time required to evacuate/shelter/secure: 7 min.

Total Participants: 2,000 Remarks: \_\_\_\_\_

This report is for Emergency Drill

Fire# <u>X</u>	out of 5 for school year 20 <u>23/24</u>
Tornado# _____	out of 2 for school year 20____/20____
Shelter IP# _____	out of 1 for school year 20____/20____
Lockdown# _____	out of 2 for school year 20____/20____
Cardiac# _____	out of 1 for school year 20____/20____

Name of person conducting drill: Tom Hasford

Title of person conducting drill: Principal

Signature of person conducting drill: 

Fire (fire chief or designee) present  
Name and Title: \_\_\_\_\_

**MUST RETURN TO SECURITY OFFICE WITHIN 24 HOURS OF DRILL  
FAX NUMBER 866-7112**