

School Emergency Drills Documentation Form

Type of Drill

- Fire Drill (6 required)
- Tornado Drill (2 required)
- Lock Down/Shelter in Place Drill (2 required)

Time of Drill

- Standard
- Class Change
- Recess
- Other Events

Name of Reporting School: Berrie Springs Virtual Academy

Date of Drill: 11/19 Time drill was held: 10 AM (pm/am)

Exact time required to evacuate/shelter/secure: _____

Total Participants: 4 staff 2 students

Remarks: Reviewed procedures w/ students and staff.

This report is for emergency drill # _____ for school year _____.

Name of person conducting drill: Rachel Stout

Title of person conducting drill: Principal

Signature of person conducting drill: [Signature]

Drill Was Coordinated With:

- Emergency Management Coordinator
Name & Title _____

AND

- Law Enforcement (county sheriff or chief of police or designee or MSP)
Name & Title _____

OR

- Fire (fire chief or designee)
Name & Title _____