

# EXTENDED DAY PROGRAM

## Drill Report



School Name: \_\_\_\_\_

Date and time of drill: \_\_\_\_\_

Drill Type (fire, shelter-in-place, lock-down): \_\_\_\_\_

Person in charge conducting the drill: \_\_\_\_\_

Number of students evacuated: \_\_\_\_\_

Were the elements of the Emergency Plan followed: \_\_\_\_\_

Total time of drill (from start until all children/staff were accounted for in meeting place) \_\_\_\_\_

Explain where the drill began and the simulated conditions:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were there any deficiencies noted during the drill? If yes, explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of all employees present during drill:


Drill Report Completed by: \_\_\_\_\_

Date: \_\_\_\_\_

Principal Signature: \_\_\_\_\_

Date: \_\_\_\_\_