



# Emergency Drill Reporting Form

School:	A+S	Date:	JUNE 5 <sup>TH</sup> 2024		
District:	15 <sup>TH</sup>	# Students:	840	# Staff:	125
Person Completing Form and Title:	CARL PHARO / FACIL. MGR.	# Visitors:	3	TOTAL PARTICIPANTS	967

Time Drill Began:	10:01 AM	Time Drill Concluded:	10:04 AM	Time to Evacuate: (fire/evacuation drills only)	3 MIN
-------------------	----------	-----------------------	----------	---	-------

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature _____ F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input type="checkbox"/> Phone <input type="checkbox"/> Voice Notification <input checked="" type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TONY EARLY	JUDY TAGGART

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE THE BLDG IN A SAFE AND QUICK MANNER.

JUNE 5, 2024  
Judy Taggart



# Emergency Drill Reporting Form

## Page 2

### Problems Encountered: (Check all that apply)

- ☒ Congestion in hallways
- ☐ Alarm not heard
- ☐ Students unsure of what to do / proper
- ☐ Staff unsure of responsibilities / response
- ☐ Weather-related problems
- ☐ Unable to lock doors
- ☐ Windows not covered
- ☐ Windows left open
- ☐ Doors left open
- ☐ Lights left on
- ☐ Students not accounted for / attendance
- ☐ Difficulties with evacuation of disabled students or staff
- ☐ Unable to access school mapping system
- ☐ Students unaccounted for (note # below)

### Attach Separate Sheet Documenting Specific Issues

- ☐ Radio communication problems
- ☐ Network / computer problems
- ☐ Noise impedes communications
- ☐ Students not out of sight (lockdown drill)
- ☐ Long time to evacuate building
- ☐ Students not serious about drill
- ☐ Frightened students (lockdown drill)
- ☐ Improper or unavailable supplies (SiP)
- ☐ Confusion
- ☐ Doors or Exits blocked
- ☐ Transportation
- ☐ Interagency miscommunications
- ☐ Incident command problems
- ☐ Other: \_\_\_\_\_

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

### Mitigation / Plans for Improvement: (check all that apply and explain below)

- ☒ Additional staff training
- ☐ Additional student training
- ☐ Address need for additional equipment
- ☐ Improved emergency supplies
- ☐ Cooperative planning with responders
- ☐ Revised emergency procedures
- ☐ Additional Drills or Exercising Needed

☐ OTHER (list)

Form Completed by

CARL MAGO

Printed Name

FACIL-MGR.

Title

*Carl Mago*

Signature

6-5-2024

Date





# Emergency Drill Reporting Form

School: Philadelphia Charter School For Arts & Science	Date: 5/17/24	
District: 15th	# Students: 497	# Staff: 125
Person Completing Form and Title: Jack McCauley - Facilities	# Visitors: 3	TOTAL PARTICIPANTS 1125

Time Drill Began: 9:56	Time Drill Concluded: 10:00	Time to Evacuate: (fire/evacuation drills only) 3:41
------------------------	-----------------------------	--

Type of Drill: <input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SiP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	Type of School: <input checked="" type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	Weather Conditions: <input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input checked="" type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature 64 F
--	--	---

Participants: (check all that apply) <input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input checked="" type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	Notification / Alert Method: <input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input checked="" type="checkbox"/> Siren <input type="checkbox"/> Other:	Situation at Start of Drill: <input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:
--	---	---

Incident Command System Used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Incident Commander: Tony Early	Operations Chief: Judith Taggart 5/17/24
---	-----------------------------------	---

LIST THE OBJECTIVES for the DRILL BELOW To evacuate building in a quick and safe manner.
---



# Emergency Drill Reporting Form

## Page 2

Problems Encountered: (Check all that apply)	Attach Separate Sheet Documenting Specific Issues
<ul style="list-style-type: none"><li><input type="checkbox"/> Congestion in hallways</li><li><input type="checkbox"/> Alarm not heard</li><li><input type="checkbox"/> Students unsure of what to do / proper</li><li><input type="checkbox"/> Staff unsure of responsibilities / response</li><li><input type="checkbox"/> Weather-related problems</li><li><input type="checkbox"/> Unable to lock doors</li><li><input type="checkbox"/> Windows not covered</li><li><input type="checkbox"/> Windows left open</li><li><input type="checkbox"/> Doors left open</li><li><input type="checkbox"/> Lights left on</li><li><input type="checkbox"/> Students not accounted for / attendance</li><li><input type="checkbox"/> Difficulties with evacuation of disabled students or staff</li><li><input type="checkbox"/> Unable to access school mapping system</li><li><input type="checkbox"/> Students unaccounted for (note # below)</li></ul>	<ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Radio communication problems</li><li><input type="checkbox"/> Network / computer problems</li><li><input type="checkbox"/> Noise impedes communications</li><li><input type="checkbox"/> Students not out of sight (lockdown drill)</li><li><input type="checkbox"/> Long time to evacuate building</li><li><input type="checkbox"/> Students not serious about drill</li><li><input type="checkbox"/> Frightened students (lockdown drill)</li><li><input type="checkbox"/> Improper or unavailable supplies (SiP)</li><li><input type="checkbox"/> Confusion</li><li><input type="checkbox"/> Doors or Exits blocked</li><li><input type="checkbox"/> Transportation</li><li><input type="checkbox"/> Interagency miscommunications</li><li><input type="checkbox"/> Incident command problems</li><li><input type="checkbox"/> Other: _____</li></ul>

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

Rehearsal in gym for concert.

### Mitigation / Plans for Improvement: (check all that apply and explain below)

<ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Additional staff training</li><li><input type="checkbox"/> Additional student training</li><li><input type="checkbox"/> Address need for additional equipment</li><li><input type="checkbox"/> Improved emergency supplies</li><li><input type="checkbox"/> Cooperative planning with responders</li><li><input type="checkbox"/> Revised emergency procedures</li><li><input type="checkbox"/> Additional Drills or Exercising Needed</li></ul>	<input type="checkbox"/> OTHER (list)
--	---------------------------------------

Form Completed by

Jack McLauley

Printed Name

Facilities

Title

SM

Signature

5/17/24

Date





# Emergency Drill Reporting Form

School:	A+S	Date:	4-9-24		
District:	157A	# Students:	997	# Staff:	125
Person Completing Form and Title:	CARC Pharo / FACIL. MGR.	# Visitors:	2	TOTAL PARTICIPANTS	1124

Time Drill Began:	2:00 PM	Time Drill Concluded:	2:02 <sup>57 sec.</sup>	Time to Evacuate: (fire/evacuation drills only)	2:57 <sup>11 sec.</sup>
-------------------	---------	-----------------------	-------------------------	---	-------------------------

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature <u>76°</u> F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TONY EARLY	JUDITH TAGGART

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE THE BLDG IN A QUICK AND SAFE MANNER.



# Emergency Drill Reporting Form

## Page 2

### Problems Encountered: (Check all that apply)

- ☐ Congestion in hallways
- ☐ Alarm not heard
- ☐ Students unsure of what to do / proper
- ☐ Staff unsure of responsibilities / response
- ☐ Weather-related problems
- ☐ Unable to lock doors
- ☐ Windows not covered
- ☐ Windows left open
- ☐ Doors left open
- ☐ Lights left on
- ☐ Students not accounted for / attendance
- ☐ Difficulties with evacuation of disabled students or staff
- ☐ Unable to access school mapping system
- ☐ Students unaccounted for (note # below)

### Attach Separate Sheet Documenting Specific Issues

- ☒ Radio communication problems
- ☐ Network / computer problems
- ☐ Noise impedes communications
- ☐ Students not out of sight (lockdown drill)
- ☐ Long time to evacuate building
- ☐ Students not serious about drill
- ☐ Frightened students (lockdown drill)
- ☐ Improper or unavailable supplies (SiP)
- ☐ Confusion
- ☐ Doors or Exits blocked
- ☐ Transportation
- ☐ Interagency miscommunications
- ☐ Incident command problems
- ☐ Other: \_\_\_\_\_

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

RAW DRILL DURING LUNCH AND  
TRANSITION.

### Mitigation / Plans for Improvement: (check all that apply and explain below)

- ☒ Additional staff training
- ☐ Additional student training
- ☐ Address need for additional equipment
- ☐ Improved emergency supplies
- ☐ Cooperative planning with responders
- ☐ Revised emergency procedures
- ☐ Additional Drills or Exercising Needed

☐ OTHER (list)

Form Completed by

CARL PHARO

Printed Name

FACIL. MGR.

Title

*Carl Pharo*

Signature

4/9/24

Date





# Emergency Drill Reporting Form

School:	A+S	Date:	2-3-12-24		
District:	15 Th.	# Students:	944	# Staff:	125
Person Completing Form and Title:	FACILITIES MANAGER	# Visitors:	2	TOTAL PARTICIPANTS	1071

Time Drill Began:	2:09 PM	Time Drill Concluded:	2:12 PM	Time to Evacuate: (fire/evacuation drills only)	1 min 5 sec 3:28
-------------------	---------	-----------------------	---------	---	------------------

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature 64° F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TONY EARLY	JUDITH TAGGART, CEO JUDY TAGGART

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE BLDG. IN A SAFE AND QUICK TIME.



# Emergency Drill Reporting Form

## Page 2

Problems Encountered: (Check all that apply)	Attach Separate Sheet Documenting Specific Issues
<ul style="list-style-type: none"><li><input type="checkbox"/> Congestion in hallways</li><li><input type="checkbox"/> Alarm not heard</li><li><input type="checkbox"/> Students unsure of what to do / proper</li><li><input type="checkbox"/> Staff unsure of responsibilities / response</li><li><input type="checkbox"/> Weather-related problems</li><li><input type="checkbox"/> Unable to lock doors</li><li><input type="checkbox"/> Windows not covered</li><li><input type="checkbox"/> Windows left open</li><li><input type="checkbox"/> Doors left open</li><li><input type="checkbox"/> Lights left on</li><li><input type="checkbox"/> Students not accounted for / attendance</li><li><input type="checkbox"/> Difficulties with evacuation of disabled students or staff</li><li><input type="checkbox"/> Unable to access school mapping system</li><li><input type="checkbox"/> Students unaccounted for (note # below)</li></ul>	<ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Radio communication problems</li><li><input type="checkbox"/> Network / computer problems</li><li><input type="checkbox"/> Noise impedes communications</li><li><input type="checkbox"/> Students not out of sight (lockdown drill)</li><li><input type="checkbox"/> Long time to evacuate building</li><li><input type="checkbox"/> Students not serious about drill</li><li><input type="checkbox"/> Frightened students (lockdown drill)</li><li><input type="checkbox"/> Improper or unavailable supplies (SiP)</li><li><input type="checkbox"/> Confusion</li><li><input type="checkbox"/> Doors or Exits blocked</li><li><input type="checkbox"/> Transportation</li><li><input type="checkbox"/> Interagency miscommunications</li><li><input type="checkbox"/> Incident command problems</li><li><input type="checkbox"/> Other: _____</li></ul>
Extenuating Circumstances / Identified Factors / Special Conditions Simulated:  RAN FIRE DRILL DURING TRANSITION AND RECESS.	

Mitigation / Plans for Improvement: (check all that apply and explain below)	
<ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Additional staff training</li><li><input type="checkbox"/> Additional student training</li><li><input type="checkbox"/> Address need for additional equipment</li><li><input type="checkbox"/> Improved emergency supplies</li><li><input type="checkbox"/> Cooperative planning with responders</li><li><input type="checkbox"/> Revised emergency procedures</li><li><input type="checkbox"/> Additional Drills or Exercising Needed</li></ul>	<input type="checkbox"/> OTHER (list)

Form Completed by

CARL PHARO FACIL. MGR.

Printed Name

Title

Signature

Date

3-12-24





# Emergency Drill Reporting Form

School: <u>AES Charter</u>	Date: <u>2-29-24</u>	
District: <u>15th</u>	# Students: <u>997</u>	# Staff: <u>125</u>
Person Completing Form and Title: <u>CARE PRO / FACILITIES MGR.</u>	# Visitors: <u>0</u>	TOTAL PARTICIPANTS <u>1122</u>

Time Drill Began: <u>2:01 PM</u>	Time Drill Concluded: <u>2:04<sup>15</sup></u>	Time to Evacuate: (fire/evacuation drills only) <u>3<sup>M</sup> 15<sup>SEC</sup></u>
----------------------------------	--	---

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input checked="" type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature <u>37°</u> F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input checked="" type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input checked="" type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>TONY EARLY</u>	<u>JUDY TAGALI</u>

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE THE BUILDING IN A SAFE AND QUICK MANNER.



# Emergency Drill Reporting Form

## Page 2

### Problems Encountered: (Check all that apply)

- ☐ Congestion in hallways
- ☐ Alarm not heard
- ☐ Students unsure of what to do / proper
- ☐ Staff unsure of responsibilities / response
- ☐ Weather-related problems
- ☐ Unable to lock doors
- ☐ Windows not covered
- ☐ Windows left open
- ☐ Doors left open
- ☐ Lights left on
- ☐ Students not accounted for / attendance
- ☐ Difficulties with evacuation of disabled students or staff
- ☐ Unable to access school mapping system
- ☐ Students unaccounted for (note # below)

### Attach Separate Sheet Documenting Specific Issues

- ☒ Radio communication problems
- ☐ Network / computer problems
- ☐ Noise impedes communications
- ☐ Students not out of sight (lockdown drill)
- ☐ Long time to evacuate building
- ☐ Students not serious about drill
- ☐ Frightened students (lockdown drill)
- ☐ Improper or unavailable supplies (SiP)
- ☐ Confusion
- ☐ Doors or Exits blocked
- ☐ Transportation
- ☐ Interagency miscommunications
- ☐ Incident command problems
- ☐ Other: \_\_\_\_\_

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

USED LIQUID SMOKE TO SIMULATE FIRE SMOKE.

### Mitigation / Plans for Improvement: (check all that apply and explain below)

- ☒ Additional staff training
- ☐ Additional student training
- ☐ Address need for additional equipment
- ☐ Improved emergency supplies
- ☐ Cooperative planning with responders
- ☐ Revised emergency procedures
- ☐ Additional Drills or Exercising Needed

☐ OTHER (list)

Form Completed by

CARC PHOTO

Printed Name

FACIL. MGR.

Title

Carle

Signature

2-29-24

Date





# Emergency Drill Reporting Form

School: <u>A+S</u>	Date: <u>1-30-24</u>	
District: <u>15<sup>th</sup></u>	# Students: <u>935</u>	# Staff: <u>125</u>
Person Completing Form and Title: <u>CARL Pharo / FACILIT. MGR.</u>	# Visitors: <u>0</u>	TOTAL PARTICIPANTS <u>1060</u>

Time Drill Began: <u>2:02 PM</u>	Time Drill Concluded: <u>2:05</u>	Time to Evacuate: <u>11:58</u> (fire/evacuation drills only)
----------------------------------	-----------------------------------	---

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature <u>42</u> F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input type="checkbox"/> Bell or Buzzer <input type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input checked="" type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>TONY EARLY</u>	<u>JUDY TAGART</u>

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE THE BUILDING IN A SAFE AND TIMELY MANNER.



# Emergency Drill Reporting Form

## Page 2

### Problems Encountered: (Check all that apply)

- ☐ Congestion in hallways
- ☐ Alarm not heard
- ☐ Students unsure of what to do / proper
- ☐ Staff unsure of responsibilities / response
- ☐ Weather-related problems
- ☐ Unable to lock doors
- ☐ Windows not covered
- ☐ Windows left open
- ☒ Doors left open
- ☐ Lights left on
- ☐ Students not accounted for / attendance
- ☐ Difficulties with evacuation of disabled students or staff
- ☐ Unable to access school mapping system
- ☐ Students unaccounted for (note # below)

### Attach Separate Sheet Documenting Specific Issues

- ☐ Radio communication problems
- ☐ Network / computer problems
- ☐ Noise impedes communications
- ☐ Students not out of sight (lockdown drill)
- ☐ Long time to evacuate building
- ☐ Students not serious about drill
- ☐ Frightened students (lockdown drill)
- ☐ Improper or unavailable supplies (SiP)
- ☐ Confusion
- ☐ Doors or Exits blocked
- ☐ Transportation
- ☐ Interagency miscommunications
- ☐ Incident command problems
- ☐ Other: \_\_\_\_\_

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

### Mitigation / Plans for Improvement: (check all that apply and explain below)

- ☒ Additional staff training
- ☐ Additional student training
- ☐ Address need for additional equipment
- ☐ Improved emergency supplies
- ☐ Cooperative planning with responders
- ☐ Revised emergency procedures
- ☐ Additional Drills or Exercising Needed

☐ OTHER (list)

Form Completed by

Printed Name

Title

Signature

Date

CARL PHARO FACIL. MGR.

*Carl Pharo*

01-30-24





# Emergency Drill Reporting Form

School: <u>A+S</u>	Date: <u>12-12-23</u>	
District: <u>15 Th.</u>	# Students: <u>970</u>	# Staff: <u>130</u>
Person Completing Form and Title: <u>CARL PHARO - FACIL. SUPERV.</u>	# Visitors: <u>2</u>	TOTAL PARTICIPANTS <u>1102</u>

Time Drill Began: <u>2:06 PM</u>	Time Drill Concluded: <u>2:09 PM</u>	Time to Evacuate: (fire/evacuation drills only) <u>3 MIN.</u>
----------------------------------	--------------------------------------	---

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature <u>48°</u> F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input checked="" type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>TONY EARLY</u>	<u>JUDY TAGGART</u>

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE THE BUILDING IN A QUICK AND SAFE MANNER.



# Emergency Drill Reporting Form

## Page 2

Problems Encountered: (Check all that apply)	Attach Separate Sheet Documenting Specific Issues
<ul style="list-style-type: none"><li><input type="checkbox"/> Congestion in hallways</li><li><input type="checkbox"/> Alarm not heard</li><li><input type="checkbox"/> Students unsure of what to do / proper</li><li><input type="checkbox"/> Staff unsure of responsibilities / response</li><li><input type="checkbox"/> Weather-related problems</li><li><input type="checkbox"/> Unable to lock doors</li><li><input type="checkbox"/> Windows not covered</li><li><input type="checkbox"/> Windows left open</li><li><input checked="" type="checkbox"/> Doors left open</li><li><input type="checkbox"/> Lights left on</li><li><input type="checkbox"/> Students not accounted for / attendance</li><li><input type="checkbox"/> Difficulties with evacuation of disabled students or staff</li><li><input type="checkbox"/> Unable to access school mapping system</li><li><input type="checkbox"/> Students unaccounted for (note # below)</li></ul>	<ul style="list-style-type: none"><li><input type="checkbox"/> Radio communication problems</li><li><input type="checkbox"/> Network / computer problems</li><li><input type="checkbox"/> Noise impedes communications</li><li><input type="checkbox"/> Students not out of sight (lockdown drill)</li><li><input type="checkbox"/> Long time to evacuate building</li><li><input type="checkbox"/> Students not serious about drill</li><li><input type="checkbox"/> Frightened students (lockdown drill)</li><li><input type="checkbox"/> Improper or unavailable supplies (SiP)</li><li><input type="checkbox"/> Confusion</li><li><input type="checkbox"/> Doors or Exits blocked</li><li><input type="checkbox"/> Transportation</li><li><input type="checkbox"/> Interagency miscommunications</li><li><input type="checkbox"/> Incident command problems</li><li><input type="checkbox"/> Other: _____</li></ul>
Extenuating Circumstances / Identified Factors / Special Conditions Simulated:	

Mitigation / Plans for Improvement: (check all that apply and explain below)	
<ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Additional staff training</li><li><input type="checkbox"/> Additional student training</li><li><input type="checkbox"/> Address need for additional equipment</li><li><input type="checkbox"/> Improved emergency supplies</li><li><input type="checkbox"/> Cooperative planning with responders</li><li><input type="checkbox"/> Revised emergency procedures</li><li><input type="checkbox"/> Additional Drills or Exercising Needed</li></ul>	<input type="checkbox"/> OTHER (list)

Form Completed by

CARL PHARO

Printed Name

FACIL. SUPERV.

Title

*Carl Pharo*

Signature

12-12-23

Date





# Emergency Drill Reporting Form

School:	A + S		Date:	11-16-23		
District:	15 <sup>TH</sup>		# Students:	987	# Staff:	128
Person Completing Form and Title:	CARL Pharo / BLDG SUPERVISOR		# Visitors:	2	TOTAL PARTICIPANTS	1117

Time Drill Began:	2:08 PM <sup>57 sec</sup>	Time Drill Concluded:	2:12 PM	Time to Evacuate: (fire/evacuation drills only)	<sup>M</sup> 3 + 3 <sup>sec</sup>
-------------------	---------------------------	-----------------------	---------	---	-----------------------------------

<b>Type of Drill:</b> <input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<b>Type of School:</b> <input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<b>Weather Conditions:</b> <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature _____ F
<b>Participants: (check all that apply)</b> <input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<b>Notification / Alert Method:</b> <input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input checked="" type="checkbox"/> Intercom <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input checked="" type="checkbox"/> Siren <input type="checkbox"/> Other:	<b>Situation at Start of Drill:</b> <input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:
<b>Incident Command System Used?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Incident Commander:</b> TONY EARL	<b>Operations Chief:</b> JUDY TAZZART

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE THE BLDG IN A QUICK AND SAFE MANNER.



# Emergency Drill Reporting Form

## Page 2

Problems Encountered: (Check all that apply)	Attach Separate Sheet Documenting Specific Issues
<ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Congestion in hallways</li><li><input type="checkbox"/> Alarm not heard</li><li><input type="checkbox"/> Students unsure of what to do / proper</li><li><input type="checkbox"/> Staff unsure of responsibilities / response</li><li><input type="checkbox"/> Weather-related problems</li><li><input type="checkbox"/> Unable to lock doors</li><li><input type="checkbox"/> Windows not covered</li><li><input type="checkbox"/> Windows left open</li><li><input type="checkbox"/> Doors left open</li><li><input type="checkbox"/> Lights left on</li><li><input type="checkbox"/> Students not accounted for / attendance</li><li><input type="checkbox"/> Difficulties with evacuation of disabled students or staff</li><li><input type="checkbox"/> Unable to access school mapping system</li><li><input type="checkbox"/> Students unaccounted for (note # below)</li></ul>	<ul style="list-style-type: none"><li><input type="checkbox"/> Radio communication problems</li><li><input type="checkbox"/> Network / computer problems</li><li><input type="checkbox"/> Noise impedes communications</li><li><input type="checkbox"/> Students not out of sight (lockdown drill)</li><li><input type="checkbox"/> Long time to evacuate building</li><li><input type="checkbox"/> Students not serious about drill</li><li><input type="checkbox"/> Frightened students (lockdown drill)</li><li><input type="checkbox"/> Improper or unavailable supplies (SiP)</li><li><input type="checkbox"/> Confusion</li><li><input type="checkbox"/> Doors or Exits blocked</li><li><input type="checkbox"/> Transportation</li><li><input type="checkbox"/> Interagency miscommunications</li><li><input type="checkbox"/> Incident command problems</li><li><input type="checkbox"/> Other: _____</li></ul>
Extenuating Circumstances / Identified Factors / Special Conditions Simulated:	

Mitigation / Plans for Improvement: (check all that apply and explain below)	
<ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Additional staff training</li><li><input type="checkbox"/> Additional student training</li><li><input type="checkbox"/> Address need for additional equipment</li><li><input type="checkbox"/> Improved emergency supplies</li><li><input type="checkbox"/> Cooperative planning with responders</li><li><input type="checkbox"/> Revised emergency procedures</li><li><input type="checkbox"/> Additional Drills or Exercising Needed</li></ul>	<input type="checkbox"/> OTHER (list)

Form Completed by

CARL Phero

Printed Name

FACILITIES SUPERV.

Title

*Carl Phero*

Signature

11-16-23

Date





# Emergency Drill Reporting Form

School: Philadelphia Charter for Arts & Science	Date: 10/16/23	
District: 15 <sup>TH</sup>	# Students: 989	# Staff: 126
Person Completing Form and Title: Jack McCanley	# Visitors: 3	TOTAL PARTICIPANTS

Time Drill Began: 2:16 pm	Time Drill Concluded: 2:20 pm	Time to Evacuate: (fire/evacuation drills only) 4 mins
---------------------------	-------------------------------	--

<b>Type of Drill:</b> <input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<b>Type of School:</b> <input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<b>Weather Conditions:</b> <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature <u>61</u> F
---	---	---

<b>Participants: (check all that apply)</b> <input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<b>Notification / Alert Method:</b> <input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input type="checkbox"/> Intercom <input type="checkbox"/> Phone <input type="checkbox"/> Voice Notification <input type="checkbox"/> Siren <input type="checkbox"/> Other:	<b>Situation at Start of Drill:</b> <input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:
--	---	--

<b>Incident Command System Used?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Incident Commander:</b> Tony Early	<b>Operations Chief:</b> Jack McCanley
--	--	---

LIST THE OBJECTIVES for the DRILL BELOW

To evacuate the building in a quick and safe manner.



# Emergency Drill Reporting Form

## Page 2

### Problems Encountered: (Check all that apply)

- ☐ Congestion in hallways
- ☐ Alarm not heard
- ☐ Students unsure of what to do / proper
- ☒ Staff unsure of responsibilities / response
- ☐ Weather-related problems
- ☐ Unable to lock doors
- ☐ Windows not covered
- ☐ Windows left open
- ☐ Doors left open
- ☐ Lights left on
- ☐ Students not accounted for / attendance
- ☐ Difficulties with evacuation of disabled students or staff
- ☐ Unable to access school mapping system
- ☐ Students unaccounted for (note # below)

### Attach Separate Sheet Documenting Specific Issues

- ☐ Radio communication problems
- ☐ Network / computer problems
- ☐ Noise impedes communications
- ☐ Students not out of sight (lockdown drill)
- ☐ Long time to evacuate building
- ☐ Students not serious about drill
- ☐ Frightened students (lockdown drill)
- ☐ Improper or unavailable supplies (SiP)
- ☐ Confusion
- ☐ Doors or Exits blocked
- ☐ Transportation
- ☐ Interagency miscommunications
- ☐ Incident command problems
- ☐ Other: \_\_\_\_\_

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

### Mitigation / Plans for Improvement: (check all that apply and explain below)

- ☒ Additional staff training
- ☐ Additional student training
- ☐ Address need for additional equipment
- ☐ Improved emergency supplies
- ☐ Cooperative planning with responders
- ☐ Revised emergency procedures
- ☐ Additional Drills or Exercising Needed

☐ OTHER (list)

Form Completed by

Jack McCauley

Printed Name

Assistant Building Supervisor

Title

Signature

[Signature]

10/16/23

Date





# Emergency Drill Reporting Form

School: <u>A+S</u>	Date: <u>9-19-23</u>	
District: <u>15<sup>TH</sup></u>	# Students: <u>988</u>	# Staff: <u>125</u>
Person Completing Form and Title: <u>Carl Pharo / FACILITIES MGR</u>	# Visitors: <u>4</u>	TOTAL PARTICIPANTS <u>1117</u>

Time Drill Began: <u>10:33 AM</u>	Time Drill Concluded: <u>10:37 AM</u>	Time to Evacuate: (fire/evacuation drills only) <u>3<sup>M</sup> + 48<sup>sec</sup></u>
-----------------------------------	---------------------------------------	---

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature _____ F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input checked="" type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input checked="" type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input type="checkbox"/> Intercom <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Voice Notification <input checked="" type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>ANTHONY FAREY</u>	<u>JUDY TREGGART</u>

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE ALL PERSONS IN A SAFE AND QUICK MANNER



# Emergency Drill Reporting Form

## Page 2

### Problems Encountered: (Check all that apply)

- ☐ Congestion in hallways
- ☐ Alarm not heard
- ☐ Students unsure of what to do / proper
- ☐ Staff unsure of responsibilities / response
- ☐ Weather-related problems
- ☐ Unable to lock doors
- ☐ Windows not covered
- ☐ Windows left open
- ☐ Doors left open
- ☐ Lights left on
- ☐ Students not accounted for / attendance
- ☐ Difficulties with evacuation of disabled students or staff
- ☐ Unable to access school mapping system
- ☐ Students unaccounted for (note # below)

### Attach Separate Sheet Documenting Specific Issues

- ☒ Radio communication problems
- ☐ Network / computer problems
- ☐ Noise impedes communications
- ☐ Students not out of sight (lockdown drill)
- ☐ Long time to evacuate building
- ☐ Students not serious about drill
- ☐ Frightened students (lockdown drill)
- ☐ Improper or unavailable supplies (SiP)
- ☐ Confusion
- ☐ Doors or Exits blocked
- ☐ Transportation
- ☐ Interagency miscommunications
- ☐ Incident command problems
- ☐ Other: \_\_\_\_\_

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

SMOKE WAS DETECTED IN BATHROOM ON 2ND FLOOR STAFF LOUNGE FROM A VAPOR PEN.

### Mitigation / Plans for Improvement: (check all that apply and explain below)

- ☒ Additional staff training
- ☐ Additional student training
- ☐ Address need for additional equipment
- ☐ Improved emergency supplies
- ☐ Cooperative planning with responders
- ☐ Revised emergency procedures
- ☐ Additional Drills or Exercising Needed

☐ OTHER (list)

Form Completed by

CARE Koro

FACILITIES MGR.

Printed Name

Title

Signature

Date

9-19-23





# Emergency Drill Reporting Form

School:	A+S		Date:	7-27-23		
District:	15 <sup>th</sup>		# Students:	60	# Staff:	30
Person Completing Form and Title:	CARL PHARO / BLDG SUPERVISOR		# Visitors:	0	TOTAL PARTICIPANTS	90

Time Drill Began:	11:28 AM	Time Drill Concluded:	11:31 AM	Time to Evacuate: (fire/evacuation drills only)	2 <sup>M</sup> - 36 <sup>Sec</sup>
-------------------	----------	-----------------------	----------	---	------------------------------------

Type of Drill:	Type of School:	Weather Conditions:
<input checked="" type="checkbox"/> Fire / Evacuation <input type="checkbox"/> Lockdown <input type="checkbox"/> Modified Lockdown <input type="checkbox"/> Shelter-in-Place (SIP) <input type="checkbox"/> Medical Emergency <input type="checkbox"/> Weather Emergency <input type="checkbox"/> Other: _____	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> Junior High School <input type="checkbox"/> High School <input checked="" type="checkbox"/> K-8 <input type="checkbox"/> K-12 <input type="checkbox"/> Alternative School <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Rain and wind <input type="checkbox"/> Windy <input type="checkbox"/> Snow / Sleet <input type="checkbox"/> Hail Ambient Temperature _____ F

Participants: (check all that apply)	Notification / Alert Method:	Situation at Start of Drill:
<input checked="" type="checkbox"/> School Administrators <input checked="" type="checkbox"/> Teachers / Para-educators <input checked="" type="checkbox"/> Custodial Staff <input checked="" type="checkbox"/> Students <input type="checkbox"/> School Security Officers <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Department <input type="checkbox"/> Emergency Medical Services <input type="checkbox"/> County Emergency Mgmt. <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Bell or Buzzer <input checked="" type="checkbox"/> Enhanced Alert System <input type="checkbox"/> Intercom <input type="checkbox"/> Phone <input type="checkbox"/> Voice Notification <input type="checkbox"/> Siren <input type="checkbox"/> Other:	<input type="checkbox"/> Before School <input checked="" type="checkbox"/> During Class Time <input type="checkbox"/> Passing Time <input type="checkbox"/> Recess <input type="checkbox"/> Lunch Time <input type="checkbox"/> Assembly <input type="checkbox"/> After School <input type="checkbox"/> Other:

Incident Command System Used?	Incident Commander:	Operations Chief:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TONY EARLY	BELINDA WILSON

LIST THE OBJECTIVES for the DRILL BELOW

TO EVACUATE THE BLDG IN A SAFE AND TIMELY MANNER.



# Emergency Drill Reporting Form

## Page 2

### Problems Encountered: (Check all that apply)

- ☐ Congestion in hallways
- ☐ Alarm not heard
- ☐ Students unsure of what to do / proper
- ☐ Staff unsure of responsibilities / response
- ☐ Weather-related problems
- ☐ Unable to lock doors
- ☐ Windows not covered
- ☐ Windows left open
- ☐ Doors left open
- ☐ Lights left on
- ☐ Students not accounted for / attendance
- ☐ Difficulties with evacuation of disabled students or staff
- ☐ Unable to access school mapping system
- ☐ Students unaccounted for (note # below)

### Attach Separate Sheet Documenting Specific Issues

- ☐ Radio communication problems
- ☐ Network / computer problems
- ☐ Noise impedes communications
- ☐ Students not out of sight (lockdown drill)
- ☐ Long time to evacuate building
- ☐ Students not serious about drill
- ☐ Frightened students (lockdown drill)
- ☐ Improper or unavailable supplies (SiP)
- ☐ Confusion
- ☐ Doors or Exits blocked
- ☐ Transportation
- ☐ Interagency miscommunications
- ☐ Incident command problems
- ☐ Other: \_\_\_\_\_

### Extenuating Circumstances / Identified Factors / Special Conditions Simulated:

SUMMER SCHOOL IN SESSION

### Mitigation / Plans for Improvement: (check all that apply and explain below)

- ☒ Additional staff training
- ☐ Additional student training
- ☐ Address need for additional equipment
- ☐ Improved emergency supplies
- ☐ Cooperative planning with responders
- ☐ Revised emergency procedures
- ☐ Additional Drills or Exercising Needed

☐ OTHER (list)

Form Completed by

Printed Name

CARL PHARO

Title

BLDG SUPERVISOR

Signature

*Carl Pharo*

Date

7-27-23