

School Emergency Drills

On-Line Documentation Form

Type of Drill

- ☒ Fire (5 required)
☒ Tornado (2 required)
☐ Lock Down/Shelter in Place
(3 required)

Time of Drill

- ☐ Standard
☐ Class Change
☐ Recess
☐ Lunch

Name of Reporting School: _____

COCOMA HIGH SCHOOL

Date of Drill: _____

4/14/15

Time drill was held: _____

1:51 PM

(pm / am)

Exact time required to evacuate / shelter / secure: _____

3min

Total Participants: _____

~ 480

Remarks: _____

This report is for emergency drill # 8 of 10 for the school year 2014-15.

Name of person conducting the drill: _____

DAVID A. EHLER

Title of person conducting the drill: _____

PRINCIPAL

Signature of person conducting the drill: _____

David A. Ehler

Outside agency assisted with the drill or was coordinated with (select all that apply):

☒ Not Applicable

☐ Emergency Management Coordinator

Name & Title _____

☐ Law Enforcement (county sheriff or chief of police or designee or MSP)

Name & Title _____

☐ Fire (fire chief or designee)

Name & Title _____