School Emergency Drills
Online Documentation Form

Type of Drill

- [x] Fire (5 required)
- [ ] Tornado (2 required)
- [ ] Lock Down/Shelter in Place (3 required)

Time of Drill

- [x] Standard
- [ ] Class Change
- [ ] Recess
- [ ] Lunch

Name of Reporting School: Coloma Intermediate School

Date of Drill: 9/19/2017 Time drill was held: 9:00 (am) pm)

Exact time required to evacuate / shelter / secure: 2:48

Total Participants: 195

Remarks: _____

This report is for emergency drill # 1 of 10 for the school year 2017-18.

Name of person conducting the drill: Darla England

Title of person conducting the drill: Principal

Signature of person conducting the drill: Dr. Darla England

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

- [x] 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 _____