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

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

Name of Reporting School: Coloma Intermediate School

Date of Drill: 10/30/17 Time drill was held: 9:00 (pm / (am))

Exact time required to evacuate / shelter / secure: 2:10

Total Participants: 208

Remarks: _____

This report is for emergency drill # 5 of 10 for the school year 2016-17.

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 _____