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WARREN CONSOLIDATED SCHOOLS
EMERGENCY DRILLS DOCUMENTATION FORM
_____ School Year

TYPE OF DRILL

☐ Fire Drill – ***5 required**
Conduct one prior to 12/1*

☑ Tornado (Take Shelter) Drill – ***2 required**
Conduct one at the beginning of 1st sem. and beginning of 2nd sem.*

☐ Lock Down – ***3 required**
Conduct one prior to 12/1*

☐ AED/Cardiac Event

☐ Other (e.g. bus evac.)

TIME OF DRILL

☑ Standard

☐ Class Change

☐ Recess

☐ Other Events (e.g. Lunch)

Mandatory Drills ***Mandated by changes to the school code**

Name of Reporting School Community High School

Date of Drill 1.10.18 Time drill was held 1:48

Exact time required to evacuate/shelter/secure 3 min.

Total Participants 190

Remarks _____

Total required drills complete to date 1

Name and title of person conducting drill Catherine A. West

Signature of person conducting drill Catherine West Digitally signed by Catherine West Date: 2018.01.10 13:55:16 -05'00'

Drill was coordinated with:

☐ Emergency Manager/Fire/Police

Name and Title _____

☐ Drill Submitted Electronically Date _____

Submit Form