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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 Grissom Middle School

Date of Drill 10/6/2017 Time drill was held 1:00

Exact time required to evacuate/shelter/secure 4 minutes

Total Participants 855

Remarks Teacher's lounge, stage doors and 1 classroom not locked.
The issues have been resolved

Total required drills complete to date 2

Name and title of person conducting drill Jodi Samp, Assist Principal

Signature of person conducting drill _____

Drill was coordinated with:

☐ Emergency Manager/Fire/Police

Name and Title Joseph Konal, Principal

☑ Drill Submitted Electronically Date 10/6/2017

Submit Form