WARREN CONSOLIDATED SCHOOLS
EMERGENCY DRILLS DOCUMENTATION FORM

2019-2020 **School Year**

TYPE OF DRILL	**TIME OF DRILL**
☐ Fire Drill – ***5 required*** **Conduct one prior to 12/1***	☑ Standard
☐ Tornado (Take Shelter) Drill – ***2 required*** **Conduct one at the beginning of 1st sem. and beginning of 2nd sem.***	☐ Class Change
☑ Lock Down – ***3 required*** **Conduct one prior to 12/1***	☐ Recess
☐ AED/Cardiac Event	☐ Other Events (e.g. Lunch)
☐ Other (e.g. bus evac.)	

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

Name of Reporting School HOLDEN ELEMENTARY

Date of Drill 1/14/2020 Time drill was held 2:30 PM

Exact time required to evacuate/shelter/secure _____

Total Participants 400

Remarks ALICE CONE MOVED OUTSIDE THE SCHOOL
STAFF RELOCATED IF APPROPRIATE DURING THE DRILL

Total required drills complete to date 2

Name and title of person conducting drill CHERYL PRIEMER

Signature of person conducting drill C. Priemer

Drill was coordinated with:

☐ Emergency Manager/Fire/Police

Name and Title _____

☑ Drill Submitted Electronically Date 1/14/2020