School Emergency Drills Documentation Form

Type of Drill	Time of Drill
☐ Fire Drill (5 required) ☐ Tornado Drill (2 required) ☐ Lock Down/Shelter in Place (3 required) \\ \n5\(\delta \end{array}	Standard Class Change Recess Other Events
Name of Reporting School: Orchard Hills Building	
Date of Drill: 10/26/2023 Time Drill was	held: (0'.00 (AM / PM)
Exact time required to evacuate / shelter / secure:	
Total participants:	
Remarks:	
This report is for emergency drill #	or school year _ <mark>2023-2024</mark>
Name of person conducting drill: Brooke Line	baugh
Title of person conducting drill:	Acare Director
Signature of person conducting drill Kode	
Orill Was Coordinated With:	,
Emergency Management CoordinatorName and Title:	
☐ Law Enforcement (chief of police, county Name and Title:	sheriff, MSP or designee)
☐ Fire (fire chief or Designee) Name and Title:	