

SCHOOL NAME:

**SEPTEMBER TO JANUARY** 

Principal's Signature:

Superintendent's

Signature:

## SCHOOL FIRE & EVACUATION/LOCKDOWN DRILL REPORT

As per procedure APE023, a copy of this report must be submitted to the Office of the Superintendents on or before January 31 <u>AND</u> June 30 of each school year.

**SCHOOL YEAR:** 

Date:

Date:

FIRE DRILLS								
Drill Date		Fire Alarm Location	Length of Time for Evacuation (Including building check)	Post Drill Recommendations		Required Follow-Up		Principal Initials
1								
2								
3								
LOCKDOWN DRILLS								
	Drill Date		Post Drill Recommendations		Required Follow-Up		Principal Initials	
1								
Please complete, sign and email a copy of this report the Office of the Superintendents by January 31								
Р	rincipal's Sig	gnature:					Date:	
Superintendent's Signature:			Date:				Date:	
FEBRUARY TO JUNE								
FIRE DRILLS								
Drill Date		Fire Alarm Location	Length of Time for Evacuation (Including building check)	Post Drill Recommendations		Required Follow-Up		Principal Initials
4								
5								
6								
LOCKDOWN DRILLS								
Drill Date			Post Drill Recommendations		Required Follow-Up			Principal Initials
2								
TORNADO DRILL								
1								

Please complete, sign and email a copy of this report the Office of the Superintendents by June 30