

## School Drill Documentation Form

Type of Drill	Number/Schedule
Fire	Five – Three drills must be completed by December 1
Tornado	Two – One drill must be completed in March
Safety/Security	Three – One drill must be completed prior to December 1 and one after January 1 <ul style="list-style-type: none"> <li>One drill shall include security measures that are appropriate to an emergency such as the release of a hazardous material.</li> <li>One drill shall include security measures of a potentially dangerous individual on or near the school premises.</li> <li>Seek input from the administration of the school and local public safety on the nature of the drill.</li> </ul>

*Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.*

School: WHITE LAKE COMMUNITY CENTER

Principal: TOM MOORE

Date of drill: 4/13/22 Number of students: 64 Number of staff: 16

Time initiated: 10:30 (a.m./p.m.) Time concluded: 10:40 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for:  
(circle number next to applicable drill)

Fire drill number 1 2 3 4 **5** for the 2021/2022 school year

Tornado drill number 1 2 for the 2021/2022 school year

Safety/Security drill number 1 2 3 for the 2021/2022 school year

Name of person conducting drill: TOM MOORE

Title of person conducting drill: DIRECTOR

Signature or person conducting drill: [Signature] Date: 4/13/22

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

*Must post on the school's website within 30 days after completing the drill!  
 The form must be maintained on the school website for at least three years*

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*Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.*

School: White Lake Community Center

Principal: Tom Moore

Date of drill: 4/20/23 Number of students: 64 Number of staff: 20

Time initiated: 10:00 (a.m./p.m.) Time concluded: 10:10 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for: \_\_\_\_\_ Fire drill number **1 2 3 4 5** for the 2021/2022 school year  
 (circle number next to applicable drill) DRILL NO: 3 OF 3, Tornado drill number **1 2** for the 2021/2022 school year  
 Safety/Security drill number **1 2 3** for the 2021/2022 school year

Name of person conducting drill: TOM MOORE

Title of person conducting drill: DIRECTOR

Signature or person conducting drill: [Signature] Date: 4/20/23

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.	

School: Shoreline Elementary

Principal: Beth Whaley

Date of drill: 4/21/23

Number of students: 434

Number of staff: 60

Time initiated: 1:25 pm

Time concluded: 1:28 pm

Situation at Start of the Drill (Check the appropriate box)				
<input type="checkbox"/> Before school		<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time		<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: All classrooms were locked, kitchen doors were open and staff was cleaning

This report is for: Fire drill number **1 2 3 4 5** for the 2022/2023 school year (circle number next to applicable drill)

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Beth Whaley

Title of person conducting drill: Principal

Signature or person conducting drill:  Date: 4/21/23

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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School: Whitchell Middle School

Principal: CJ Van Wieren

Date of drill: 9/20/23 Number of students: 450 Number of staff: 40

Time initiated: 1:30 (a.m./p.m.) Time concluded: 1:40 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for:  
 (circle number next to applicable drill)

Fire drill number 1 2 3 4 5 for the 2022/2023 school year

Tornado drill number 1 2 for the 2022/2023 school year

Safety/Security drill number 1 2 3 for the 2022/2023 school year

Name of person conducting drill: CJ Van Wieren

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 4/24/23

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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School: Whitetail Middle School

Principal: CJ Van Wieren

Date of drill: 4/28/23 Number of students: 430 Number of staff: 40

Time initiated: 9:30 (a.m./p.m.) Time concluded: 9:40 (a.m./p.m.)

**Situation at Start of the Drill (Check the appropriate box)**

<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for:  
 (circle number next to applicable drill)

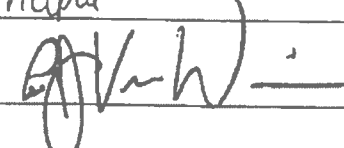
Fire drill number **1** **2** **3** **4** **5** for the 2022/2023 school year

Tornado drill number **1** **2** for the 2022/2023 school year

Safety/Security drill number **1** **2** **3** for the 2022/2023 school year

Name of person conducting drill: CJ Van Wieren

Title of person conducting drill: Principal

Signature or person conducting drill:  Date: 5/3/23

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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