## School Emergency Drills Documentation Form

|                 | Type of Drill  |                       | Time of      | <u>Drill</u>          |            |
|-----------------|--|-----------------------|--------------|-----------------------|------------|
| X <sub>1</sub>  | Fire Drill (5 required) Tornado Drill (2 required) Lock Down/Shelter in Place Dr required) | X<br>Cill (3          | Class Reces  | Change                |            |
| Name o          | f Reporting School: Andrews  | Academy               |              |                       |            |
| Date of         | Drill: 11/1/22 Ti  | ime drill was held:   | 11:31        | (pm/am)               |            |
| Exact tir       | me to evacuate/shelter/secure  | e: 3 minutes – 6 m    | inutes to re | eport                 |            |
| Total Pa        | rticipants: 258  |                       |              |                       |            |
| Remark<br>Evacu | s:<br>ation and reporting were done q  | uickly and efficientl | /.           |                       |            |
| Chan            | ge for next drill: Call needs t  | o be made to can      | npus safet   | y to report the alarm | ١.         |
|                 | All staff should know what t   | they do. Campus       | Safety is j  | ust there to observe  | <b>)</b> . |
| This rep        | ort is for emergency drill #2_   | for school yea        | r 22-23      | <b>∴</b>              |            |
| Name of         | f person conducting drill: Mars  | sha Beal              |              |                       |            |
| Title of p      | person conducting drill: Lieute  | enant                 |              |                       |            |
| Signatuı        | re of person conducting drill: _   | - Care                |              |                       |            |
| Drill Wa        | s <u>Coordinated</u> With:   |                       |              |                       |            |
|                 | Emergency Management C<br>Name & Title   | Coordinator           |              |                       |            |
|                 | AND  |                       |              |                       |            |
|                 | Law Enforcement (county s<br>Name & Title  |                       |              |                       |            |
|                 | OR   |                       |              |                       |            |
|                 | Fire (fire chief or designee) Name & Title   |                       |              |                       |            |
|                 | Please FAX to Berrien Count  | ty Emergency Mana     | gement at 2  | 69-934-9023           |            |