## School Emergency Drills Documentation Form

| Type of Drill                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| Fire Drill (5 required) *** 3 Fire drills must be completed before 12/1                                                                                 |
| Tornado Drill (2 required) *** 1 Tornado drill must be completed during month of March                                                                  |
| Lock Down/Shelter in Place  Drill (3 required)  *** 1 Shelter drill must be completed before 12/1 and 1 must  be completed after 1/1 of the school year |
| Name of Reporting School: Levey Middle School                                                                                                           |
| Date of Drill: 10-17-19 Time drill was held: 110 (am/om)                                                                                                |
| Exact time required to evacuate/shelter/secure: 2 mm                                                                                                    |
| Total Participants: 450                                                                                                                                 |
| Remarks: Went very well                                                                                                                                 |
|                                                                                                                                                         |
| This report is for emergency drill # for school year                                                                                                    |
| Name of person conducting drill: David Miller                                                                                                           |
| Title of person conducting drill: Assistant Principal                                                                                                   |
| Signature of person conducting drill:                                                                                                                   |
| Drill Was Coordinated With:                                                                                                                             |
| Emergency Management Coordinator Name & Title/                                                                                                          |
| AND                                                                                                                                                     |
| Law Enforcement (county sheriff or chief of police of pesignee or MSP)  Name & Title                                                                    |
| OR / / /                                                                                                                                                |
| Fire (fire chief or designee) Name & Title                                                                                                              |

\*\*\* Please send this form to Scott Tocco (email or fax – 248-746-7731) within one week of completed drill \*\*\*