

School Drill Documentation Form

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

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: Warren Woods Tower

Principal: Michael Mackenzie

Date of drill: 3-21-23 Number of students: 1100 Number of staff: 100

Time initiated: 10:02 (a.m./p.m.) Time concluded: 10:05:59 (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: Michael Mackenzie

Title of person conducting drill: WWT Principal

Signature or person conducting drill:  Date: 3-22-23

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: Warren Police Dept Name: Offr Frank Marek Title: SRO

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.*