

## 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: Trinity Lutheran School

Principal: Mr. Mark Brown

Date of drill: 10-26-2021 Number of students: 197 Number of staff: 15

Time initiated: 12:15 PM (a.m./p.m.) Time concluded: 12:17 PM (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input checked="" 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: Mr. Mark Brown

Title of person conducting drill: Principal

Signature or person conducting drill: Mark A. Brown Date: 10-26-2021

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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School: Trinity Lutheran School

Principal: Mr. Mark Brown

Date of drill: 9/27/2021 Number of students: 184 Number of staff: 18

Time initiated: 2:05 p.m. (a.m./p.m.) Time concluded: 2:12 p.m. (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: Mr. Mark Brown

Title of person conducting drill: Principal

Signature or person conducting drill: Mark A. Brown Date: 9/28/2021

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: Trinity Lutheran School

Principal: Mr. Mark Brown

Date of drill: 8/30/2021 Number of students: 197 Number of staff: 16

Time initiated: 10:25 a.m. (a.m./p.m.) Time concluded: 10:33 a.m. (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: Mr. Mark Brown

Title of person conducting drill: Principal

Signature or person conducting drill: Mark A. Brown Date: 8/30/2021

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: Trinity Lutheran School

Principal: Mr. Mark Brown

Date of drill: 9/21/2021 Number of students: 180 Number of staff: 18

Time initiated: 2:00 p.m. (a.m./p.m.) Time concluded: 2:10 p.m. (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: Mr. Mark Brown

Title of person conducting drill: Principal

Signature or person conducting drill: Mark A. Brown Date: 9/22/2021

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: Trinity Lutheran School

Principal: Mr. Mark Brown

Date of drill: 10-20-2021 Number of students: 184 Number of staff: 15

Time initiated: 10:45AM (a.m./p.m.) Time concluded: 10:50AM (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: Mr. Mark Brown

Title of person conducting drill: Principal

Signature or person conducting drill: Mark A. Brown Date: 10-20-2021

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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