

**ZACHARY COMMUNITY SCHOOL DISTRICT**  
**THERE MUST BE TWO DRILLS PER SEMESTER**

Name of School: \_\_\_\_\_ Address: \_\_\_\_\_

**Safety Drill Report**

Date of Drill: \_\_\_\_\_

Type of Drill:  Shelter-n-Place

Completion Time: \_\_\_\_\_ am/pm

Weather

Accountability of school population #:

Lock Down

Students: \_\_\_\_\_ Administration: \_\_\_\_\_

Intruder

Teachers: \_\_\_\_\_

Staff: \_\_\_\_\_ Visitors: \_\_\_\_\_

	<u>Yes</u>	<u>No</u>
Does each room have a leader?	<input type="checkbox"/>	<input type="checkbox"/>
Did they exit in an orderly manner?	<input type="checkbox"/>	<input type="checkbox"/>
Have provisions been made to manage disabled children?	<input type="checkbox"/>	<input type="checkbox"/>
Unpredictable occurrence: A regularly used exit may be blocked!		
Did you drill using a blocked exit?	<input type="checkbox"/>	<input type="checkbox"/>
Did you use an adult holding a sign saying EXIT BLOCKED?	<input type="checkbox"/>	<input type="checkbox"/>

**REMARKS:**

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\_\_\_\_\_  
Signature of Principal/Designee

\_\_\_\_\_  
Date

**BASIC INSTRUCTIONS:**

1. The safety of the students is first.
2. The Signal for the Drill ---
3. In case of an actual emergency, the first duty of the person discovering the emergency is to sound the alarm. No attempt, corrective action, should be made on the part of the staff. The Drill form shall be completed on THE DAY OF THE DRILL and forward the original (via pony) to the Department of Operations/Attn: Rose Kennedy.
4. A copy shall be maintained in the school office in a file labeled "SAFETY DRILL REPORT" followed by numbers designating the current school year. (i.e. 2015-16)

APPROVED: \_\_\_\_\_  
Scott Devillier, Superintendent

\_\_\_\_\_  
DATE