

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">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: Sunset Lake
Principal: Amie McCaw
Date of drill: 9-4-25 Number of students: 450 Number of staff: 65
Time initiated: 2:30 (a.m./p.m.) Time concluded: 2:34:27 (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 2024/2025 school year

Tornado drill number 1 2 for the 2024/2025 school year

Safety/Security drill number 1 2 3 for the 2024/2025 school year

Name of person conducting drill: Amie McCaw

Title of person conducting drill: Principal

Signature or person conducting drill: Amie McCaw Date: 9-4-25

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.*

School Drill Documentation Form

T. Young
9-15-25
SCANNED

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">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: Sunset Lake Elem.

Principal: Amie McCaw

Date of drill: 9/9/25 Number of students: 450 + 16 GSRP Number of staff: 65

Time initiated: 9:50 (a.m./p.m.) Time concluded: _____ (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 2024/2025 school year

Tornado drill number 1 2 for the 2024/2025 school year

Safety/Security drill number 1 2 3 for the 2024/2025 school year

Name of person conducting drill: Amanda Swan

Title of person conducting drill: School Counselor

Signature of person conducting drill: Amanda Swan Date: 9/9/25

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: Sunset Lake Elem.

Principal: Amie McCaw

Date of drill: 9-18-25 Number of students: 450 ^{+16 GSRP} Number of staff: 65

Time initiated: 3:00 (a.m./p.m.) Time concluded: 3:03 (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: Practiced all students & staff secure in building.

This report is for:
(circle number next to applicable drill)

Fire drill number 1 2 3 4 5 for the 2024/2025 school year

Tornado drill number 1 2 for the 2024/2025 school year

Safety/Security drill number 1 2 3 for the 2024/2025 school year

Name of person conducting drill: Amie McCaw

Title of person conducting drill: Principal

Signature of person conducting drill: Amie McCaw Date: 9-19-25

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: Sunset Lake Elem.

Principal: Amie McCaw

Date of drill: 9-19-25 Number of students: 450 + 16 GSRP Number of staff: 65

Time initiated: 10:35 (a.m./p.m.) Time concluded: 10:36 (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 checked="" type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: Students did a great job w/ following expectations

This report is for:
(circle number next to applicable drill)

Fire drill number 1 2 3 4 5 for the 2024/2025 school year

Tornado drill number 1 2 for the 2024/2025 school year

Safety/Security drill number 1 2 3 for the 2024/2025 school year

Name of person conducting drill: Amie McCaw

Title of person conducting drill: Principal

Signature of person conducting drill: Amie McCaw Date: 9-19-25

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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