

## School Drill Documentation

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"><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: Tobell Elementary Principal: Bill Dygest  
Date of drill: 9/12/2025 Number of students: 380 Number of Staff: 57  
Time initiated: 10:00 ☒ a.m. ☐ p.m. Time concluded 10:07 ☒ 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: (check box next to applicable drill)  
Fire drill number ☒ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 for the 25/26 school year  
Tornado drill number ☐ 1 ☐ 2 for the \_\_\_\_\_ school year  
Safety/Security drill number ☐ 1 ☐ 2 ☐ 3 for the \_\_\_\_\_ school year

Name of person conducting drill: Bill Dygest

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 9/12/2025

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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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: Tobey Elementary Principal: Bill Dygert  
Date of drill: 9/18/25 Number of students: 380 Number of Staff: 58  
Time initiated: 1:00 ☐ a.m. ☒ p.m. Time concluded 1:04 ☐ 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 type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: Fire drill number ☐1 ☐2 ☐3 ☐4 ☐5 for the \_\_\_\_\_ school year  
(check box next to applicable drill) Tornado drill number ☒1 ☐2 for the 25/26 school year  
Safety/Security drill number ☐1 ☐2 ☐3 for the \_\_\_\_\_ school year

Name of person conducting drill: Mr. Bill Dygert

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 9/18/2025

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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School: Tobey Elementary Principal: Bill Dygert

Date of drill: Sept 25, 2025 Number of students: 275 Number of Staff: 50

Time initiated: 2:01 ☐ a.m. ☒ p.m. Time concluded 2:12 ☐ 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 checked="" 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: (check box next to applicable drill) Fire drill number ☐ 1 ☒ 2 ☐ 3 ☐ 4 ☐ 5 for the 25/26 school year

Tornado drill number ☐ 1 ☐ 2 for the \_\_\_\_\_ school year

Safety/Security drill number ☐ 1 ☐ 2 ☐ 3 for the \_\_\_\_\_ school year

Name of person conducting drill: Carol Murray Eaton

Title of person conducting drill: Office Assistant

Signature or person conducting drill: Carol Murray Eaton Date: 09.25.2025

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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School: Tobey Elementary Principal: Bill Dygert  
Date of drill: 9/26/25 Number of students: 350 Number of Staff: 52  
Time initiated: 9:30 ☒ a.m. ☐ p.m. Time concluded 9:40 ☒ 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: Fire drill number ☐1 ☐2 ☐3 ☐4 ☐5 for the \_\_\_\_\_ school year  
(check box next to applicable drill)  
Tornado drill number ☐1 ☐2 for the \_\_\_\_\_ school year  
Safety/Security drill number ☒1 ☐2 ☐3 for the 25/26 school year

Name of person conducting drill: Bill Dygert

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 9/26/2025

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.*