

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: Trinity Lutheran - Monitor

Principal: Karen S. Friebe

Date of drill: Sept 8, 2022 Number of students: 148 Number of staff: 15

Time initiated: 9:07 a.m. (a.m./p.m.) Time concluded: 9:10 (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: 1st time using new fire alarm system. Everything went well.

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: Karen Friebe

Title of person conducting drill: Principal

Signature of person conducting drill: Karen Friebe Date: 9-9-2022

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: Veterans Alarm Name: (?Brandon?) Title: Office Admin.

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 - Monitor

Principal: Karen S. Friebe

Date of drill: Sept. 16, 2022 Number of students: 136 Number of staff: 16

Time initiated: 9:05 (a.m./p.m.) Time concluded: 9:20 (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 was a level 2 drill - in classrooms

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: Karen Friebe

Title of person conducting drill: Principal

Signature of person conducting drill: Karen S. Friebe Date: 9-16-22

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: Trinity Lutheran - Monitor

Principal: Karen S. Friebe

Date of drill: Oct. 5, 2022 Number of students: 140 Number of staff: 13

Time initiated: 2:25 (a.m./p.m.) Time concluded: 2:28 (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 checked="" type="checkbox"/> Passing time	<input checked="" type="checkbox"/> Recess <u>Pre K</u>
<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: Karen Friebe

Title of person conducting drill: Principal

Signature of person conducting drill: Karen S. Friebe Date: 10/5/22

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: Veteran's Alarm Name: — Title: Receptionist

Agency: Monitor Fire Dept Name: — Title: Chief

Agency: _____ Name: _____ Title: _____

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School: Trinity Lutheran - Monitor

Principal: Karen S. Friebe

Date of drill: October 13, 2022 Number of students: 139 Number of staff: 14

Time initiated: 11:36 (a.m./p.m.) Time concluded: 11:40 (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 checked="" type="checkbox"/> Recess
<input checked="" type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input checked="" type="checkbox"/> Other: <u>MS outside for Science</u>

Remarks: busy time with lunch, recess, specials + outdoor science class

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: Karen Friebe

Title of person conducting drill: Principal

Signature of person conducting drill: Karen Friebe Date: 10/13/22

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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