

Record of Emergency Evacuation Drills

Preschools/Daycares First Half

Facility Name _____
 Address _____
 City & Zip _____
 Administrator _____

First Day of School _____
 Last Day of School _____
 Fire Department BOARDMAN

EMERGENCY EVACUATION DRILLS

Month	Date/Time	Person Conducting Drill	Time to Complete Evac	No. of Staff on Duty	No. of Occup Evac	Special Conditions Simulated	Problems Encountered	Weather Conditions
January								
February								
March								
April								
May								
June								

TORNADO DRILLS

Month	Date/Time	Time to Complete Evac	No. Occup Evac	Weather Conditions
March				
April				
May				
June				



SCHOOL SAFETY DRILLS

Month	Date/Time	Length

Signature of Responsible Person

Date

This form shall be completed and faxed to 330.729.9548 or emailed to fpo@boardmantwp.com prior to February 1st. Additional Forms can be downloaded at Boardmantwp.com/Fire/education-and-safety/school-safety

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EMERGENCY EVACUATION DRILLS

Month	Date/Time	Person Conducting Drill	Time to Complete Evac	No. of Staff on Duty	No. of Occup Evac	Special Conditions Simulated	Problems Encountered	Weather Conditions
July								
August								
September								
October								
November								
December								

TORNADO DRILLS

Month	Date/Time	Time to Complete Evac	No. Occup Evac	Weather Conditions
July				
August				
September				



SCHOOL SAFETY DRILLS

Month	Date/Time	Length

 Signature of Responsible Person

 Date