

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"> • 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: Whiteford Elementary School Principal: Samuel Marsh

Date of drill: 3/13/25 Number of students: 380 Number of Staff: 40

Time initiated: 1:10 a.m. p.m. Time concluded 1:15 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 _____ school year

Tornado drill number 1 2 for the 2024/25 school year

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

Name of person conducting drill: Samuel Marsh

Title of person conducting drill: Principal

Signature or person conducting drill:  Date: 3/13/25

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: Monroe County Sheriff's Office Name: Brandon Benes Title: Deputy (SRO)

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.*