

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: Belview Elementary

Principal: Julie Piper

Date of drill: 9/9/22 Number of students: 183 Number of staff: 24

Time initiated: 1:13 (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:
 (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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 9/9/22

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: Macomb County OEM Name: _____ Title: _____

Agency: SEBESA 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: Bellevue Elem

Principal: Julie Piper

Date of drill: 9/29/22 Number of students: 201 Number of staff: 33

Time initiated: 9:45:00 (a.m./p.m.) Time concluded: 9:46:31 (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 2022/2023 school year
(circle number next to applicable drill)

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: Meaghan Durham

Title of person conducting drill: Attendance Secretary

Signature or person conducting drill: _____ Date: _____

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: Macomb Int. OEM Name: _____ Title: _____

Agency: SERVA 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: Bellview Elementary

Principal: Julie Piper

Date of drill: ~~9/29/22~~ 10/14/22 Number of students: 199 Number of staff: 30

Time initiated: 8:20 (a.m./p.m.) Time concluded: 8:22:39 (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 2022/2023 school year
 (circle number next to applicable drill)
 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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 10/14/22

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: Maramba County OEM 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: Bellview Elementary

Principal: Julie Piper

Date of drill: 10/21/22 Number of students: 197 Number of staff: _____

Time initiated: 1:30:00 (a.m./p.m.) Time concluded: 1:31:44 (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 2022/2023 school year
(circle number next to applicable drill)

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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 10/21/22

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: Macomb County OEM Name: _____ Title: _____

Agency: SEESA 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: Bellview Elementary

Principal: Julie Piper

Date of drill: 11/10/22 Number of students: 204 Number of staff: 32

Time initiated: 9:00 (a.m./p.m.) Time concluded: 9:01:14 (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 2022/2023 school year
 (circle number next to applicable drill)

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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 11/10/22

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: Mecanblaw OEM 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: Bellview Elementary

Principal: Julie Piper

Date of drill: 2/10/23 Number of students: 199 Number of staff: 30

Time initiated: 1:30 (a.m./(p.m.)) Time concluded: ~~1:45~~ 1:30 (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 2022/2023 school year
 (circle number next to applicable drill)

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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill:  Date: 2/10/23

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: Macomb County OEM 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: Bellview Elementary

Principal: Julie Piper

Date of drill: 3/14/23 Number of students: 194 Number of staff: 32

Time initiated: 12:50 (a.m./p.m.) Time concluded: 12:53 (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 checked="" type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: 5th grade lunch

This report is for: Fire drill number **1 2 3 4 5** for the 2022/2023 school year
(circle number next to applicable drill)

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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 3/14/23

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: Macomb County OEM 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: Bellview Elementary

Principal: J. Piper

Date of drill: 5/2/23 Number of students: 202 Number of staff: 35

Time initiated: 10:00 (a.m./p.m.) Time concluded: 10:23 (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 2022/2023 school year
(circle number next to applicable drill)

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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 5/2/23

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: Malambant OCM 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: Bellvue Elementary

Principal: J. Piper

Date of drill: 5/21 Number of students: 200 Number of staff: 35

Time initiated: 2:15 (a.m./p.m.) Time concluded: 2:18 (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 2022/2023 school year
 (circle number next to applicable drill)

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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 5/2/23

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: McDonough Law 06N Name: _____ Title: _____

Agency: SERESA 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: Bellview Elementary

Principal: J. Piper

Date of drill: 5/2/23 Number of students: 202 Number of staff: 35

Time initiated: 10:00 (a.m./p.m.) Time concluded: 10:23 (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:
 (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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill:  Date: 5/2/23

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: Malambant OCM 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: Bellview Elementary

Principal: Julie Piper

Date of drill: 6/5/23 Number of students: 189 Number of staff: 30

Time initiated: 10:29 (a.m./p.m.) Time concluded: 10:31 (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 checked="" type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input checked="" type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: Students were transitioning between special + a presentation in the library

This report is for: Fire drill number 1 2 3 4 5 **Correction- Drill 5** for the 2022/2023 school year
 (circle number next to applicable drill)

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: Julie Piper

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 6/5/23

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: Macomb County OSM Name: _____ Title: _____

Agency: SERESA 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.*