

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: Pleasantview Elementary

Principal: Falicia Moore-land Trice

Date of drill: 09/13/2022 Number of students: 217 Number of staff: 35

Time initiated: 9:30 am (a.m./p.m.) Time concluded: 9:32:20 am (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)

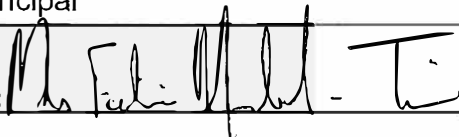
Fire drill number ① ② ③ ④ ⑤ for the 2022/2023 school year

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: Falicia Moore-land Trice

Title of person conducting drill: Principal

Signature or person conducting drill:  Date: 9/13/22

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: Macomb County OEM 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: Pleasantview Elementary ▼

Principal: Falicia Mooreland Trice

Date of drill: 10/19/2022 Number of students: 201 Number of staff: 25

Time initiated: 10:13 (a.m./p.m.) Time concluded: 10:15:20 (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: all students were on one side of the building and only using the one door to exit.

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: Falicia Trice

Title of person conducting drill: Principal

Signature or person conducting drill:  Date: 10/19/2022

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: Macomb County OEM Name: _____ Title: _____

Agency: 911 Dispatch 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: Pleasantview Elementary

Principal: Falicia MORLAND-TRICE

Date of drill: 11-17-2022 Number of students: 199 Number of staff: 27

Time initiated: 9:30 (a.m./p.m.) Time concluded: 9:31:14 sec. (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: Kelly Burg

Title of person conducting drill: ARSA

Signature or person conducting drill: Kelly Burg Date: 11-17-2022

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: _____ 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: Pleasantview Elementary
 Principal: Falicia Mooreland-Trice
 Date of drill: 11/21/22 Number of students: 164 Number of staff: 24
 Time initiated: 9:25 (a.m./p.m.) Time concluded: 9:27:32 (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** **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: Falicia Mooreland-Trice
 Title of person conducting drill: Principal
 Signature or person conducting drill: Ms. Falicia Mooreland-Trice Date: 11/21/22

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 DEM Name: _____ Title: _____
 Agency: 911 Dispatch 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: Pleasantview Elementary
 Principal: Falacia Moreland-Trice
 Date of drill: 1/12/2023 Number of students: 185 Number of staff: _____
 Time initiated: 1:30pm (a.m./p.m.) Time concluded: 1:32:20pm (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: Wendy Orris
 Title of person conducting drill: Secretary
 Signature or person conducting drill: Wendy Orris Date: 1/12/2023

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 Drill Observation Form

Problems Encountered (Check all that apply)	
<ul style="list-style-type: none"> <input type="checkbox"/> Congestion in hallways <input type="checkbox"/> Alarm not heard <input type="checkbox"/> Students unsure of proper procedures <input type="checkbox"/> Staff unsure of proper procedures <input type="checkbox"/> Use of personal technologies by students <input type="checkbox"/> Use of personal technologies by staff <input type="checkbox"/> Unable to lock doors <input type="checkbox"/> Windows not covered <input type="checkbox"/> Windows left open <input checked="" type="checkbox"/> Doors left open <input type="checkbox"/> Difficulties with evacuation of students or staff with disabilities <input type="checkbox"/> Staff and adults unaccounted for <input type="checkbox"/> Staff not serious about drill <input type="checkbox"/> Students unaccounted for 	<ul style="list-style-type: none"> <input type="checkbox"/> Radio communication problems <input type="checkbox"/> Network/computer problems <input type="checkbox"/> Weather-related problems <input type="checkbox"/> Noise impedes communications <input type="checkbox"/> Students not out of sight (safety/security drill) <input type="checkbox"/> Long time to evacuate building <input type="checkbox"/> Students not serious about drill <input type="checkbox"/> Frightened students (safety/security drill) <input type="checkbox"/> Improper or unavailable supplies <input type="checkbox"/> Confusion <input type="checkbox"/> Doors or exits blocked <input type="checkbox"/> Transportation issues <input type="checkbox"/> Interagency communication issues <input type="checkbox"/> Incident command problems <input type="checkbox"/> Other: _____

Weather Conditions	
<ul style="list-style-type: none"> <input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input checked="" type="checkbox"/> Raining <input type="checkbox"/> Rain and wind 	<ul style="list-style-type: none"> <input type="checkbox"/> Windy <input type="checkbox"/> Snow/sleet <input type="checkbox"/> Hot (above 80 degrees) <input checked="" type="checkbox"/> Cold (40 to 10 degrees)

Plans for Improvement	
<ul style="list-style-type: none"> <input type="checkbox"/> Additional staff training <input type="checkbox"/> Additional student training <input type="checkbox"/> Address need for additional equipment <input type="checkbox"/> Improved emergency supplies 	<ul style="list-style-type: none"> <input type="checkbox"/> Cooperative planning with responders <input type="checkbox"/> Revised emergency procedures <input type="checkbox"/> Improved communication <input type="checkbox"/> Other: _____

Additional Comments
<p style="font-size: 1.2em; font-family: cursive;">Some class room doors were unlocked.</p>

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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: Pleasantview Elementary

Principal: Falicia Mooreland-Trice

Date of drill: 3/2/23 Number of students: _____ Number of staff: 25

Time initiated: 9:00 (a.m./p.m.) Time concluded: 9:02¹³ (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: 5th Graders were in specials in front of building causing a delay getting out the door. Students were very loud.

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: Principal Trice

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 3/2/23

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: Macomb County OEM Name: _____ Title: _____

Agency: 911 Dispatch Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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School: Pleasant-View Elementary

Principal: Falicia Moreland-Trice

Date of drill: 3/30/2023 Number of students: 183 Number of staff: 25

Time initiated: 1:30 pm (a.m./p.m.) Time concluded: 1:31⁵⁴ (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: Kids did very well - they were watching a movie in gym & went to the hall to take cover.

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: Falicia Trice

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 3/30/2023

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: 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: Pleasantview

Principal: Falicia Moreland-Trice

Date of drill: 4/17/23 Number of students: 219 Number of staff: 24

Time initiated: 1:30 (a.m./p.m.) Time concluded: 1:32 18 (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: A Student refusal to go outside, third graders delay trying to get coats.

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: Falicia Moreland-Trice

Title of person conducting drill: Principal

Signature or person conducting drill: [Signature] Date: 4/17/23

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: 911 Dispatch Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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School: Pleasantview

Principal: Falicia Trice

Date of drill: 4/28/23 Number of students: 168 Number of staff: 22

Time initiated: 9:15 AM (a.m./p.m.) Time concluded: 9:17:67 (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: Falicia Trice

Title of person conducting drill: Principal M

Signature or person conducting drill: [Signature] Date: 4/28/23

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: 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: Pleasantview Elementary

Principal: Falicia Trice

Date of drill: 5/25/23 Number of students: 171 Number of staff: 32

Time initiated: 9:30 (a.m./p.m.) Time concluded: 9:32⁰⁵ (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: Falicia Trice

Title of person conducting drill: Principal Trice

Signature or person conducting drill: [Signature] Date: 5/25

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: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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