Dates: From_____ to_____

Wisconsin School District Record of Fire / Tornado / School Safety / Other Evacuation Drills

School District Name:_____

School Name:_____ Municipality:_____ County:_____

School Address:

Date of Drill	Time of Drill	Evacuation Time (min/sec)	# Students	# Adults	Fire Dept Invited?	Type of Drill (Fire, Tornado, School Safety, Other)	Evacuation Drill Remarks (Attach sheet if necessary.)
					Y/N		

On this form, or as an attachment, please note any deficiencies concerning: (1) the performance of alarm equipment; (2) staff functions; (3) student performance; (4) obstructions; or (5) other factors which may pose a safety hazard or affect the efficient, orderly exiting from the building. Use of this form is mandated per section 118.07 (2) (b) of the Wisconsin Statutes for annual reporting to the fire department. The person having direct charge of the school is responsible for ensuring corrections of deficiencies.

School Official's Signature:_____ **Title:**_____ **Date:**_____