

Emergency Drill Form  
Southern Utah University Head Start

CENTER \_\_\_\_\_ DATE \_\_\_\_\_

Time Drill Called \_\_\_\_\_ Drill Called By \_\_\_\_\_

Time required to secure children in a safe designated location \_\_\_\_\_

Did Teacher pick up the roll and cell phone as he/she lead children to the safe designated location?

YES \_\_\_\_\_ NO \_\_\_\_\_

Did the Advocate check the Restroom and Classroom for any children or staff?

YES \_\_\_\_\_ NO \_\_\_\_\_

Did Teacher Call roll from the Roll Book as soon as the children were in the safe designated location?

YES \_\_\_\_\_ NO \_\_\_\_\_

Do emergency flashlights have working batteries?

YES \_\_\_\_\_ NO \_\_\_\_\_

Does the radio have working batteries?

YES \_\_\_\_\_ NO \_\_\_\_\_

Has a lock down Drill been performed during the month?

YES \_\_\_\_\_ NO \_\_\_\_\_

If a lock down Drill was performed were the classroom doors secured?

YES \_\_\_\_\_ NO \_\_\_\_\_

If a lock down Drill was performed was a blast wall constructed (fort)?

YES \_\_\_\_\_ NO \_\_\_\_\_

Did the Teacher Phone the Central Office on the Cell Phone to report the drill?

YES \_\_\_\_\_ NO \_\_\_\_\_

**Please note any Problems**

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