Documenting School Safety Drill Requirements
Public Act 12 of 2014, Effective July 1, 2014

Name of school: 

School Year:

Person Responsible for conducting the drills:

Principal MUST sign at the completion of each drill to confirm completion. Update and post on school website within 30 school days of completing each drill. Do not post future drill dates. Maintain on website for at least three years. One of the drills MUST occur during lunch, recess, or another time when a significant number of students are gathered but not in a classroom. None may occur during mandated state testing.

Fire Drills
Must have a reasonable interval between each drill.

#1, date: ___/___/___ time: ___:___ (held by December 1). Principal confirmation: ____________________________
#2, date: ___/___/___ time: ___:___ (held by December 1). Principal confirmation: ____________________________
#3, date: ___/___/___ time: ___:___ (held by December 1). Principal confirmation: ____________________________
#4, date: ___/___/___ time: ___:___ (held after December 1). Principal confirmation: ____________________________
#5, date: ___/___/___ time: ___:___ (held after December 1). Principal confirmation: ____________________________

Tornado Drills
At least one tornado drill must be held in March.

#1, date: ___/___/___ time: ___ Principal confirmation: ____________________________
#2, date: ___/___/___ time: ___ Principal confirmation: ____________________________

Lockdown Drills
Include security measures appropriate to an emergency such as the release of hazardous material or the presence of a potentially dangerous individual on or near the premises during which occupants are restricted to the interior of the secured building. At least one drill MUST occur by December 1 and at least one drill MUST occur after January 1. Ensure reasonable interval between drills.

#1, date: ___/___/___ time: ___ Type of Drill: ____________________________ Principal confirmation: ____________________________
#2, date: ___/___/___ time: ___ Type of Drill: ____________________________ Principal confirmation: ____________________________
#3, date: ___/___/___ time: ___ Type of Drill: ____________________________ Principal confirmation: ____________________________

Sought input from local public safety officials. Superintendent Signature: ____________________________

Cardiac Emergency Response
A written plan for cardiac emergency response is available and includes: (check off to confirm)

_____ Use and maintenance of automated external defibrillators, if available
_____ Activation of a cardiac emergency response team during an identified cardiac emergency
_____ A plan for effective and efficient communication throughout the school campus
_____ A training plan for the use of an automated external defibrillator and CPR techniques (for schools that serve grades 9-12)
_____ Incorporation and integration of the local emergency response system and emergency response agencies with the school’s plan
_____ An annual review and evaluation of the cardiac emergency response plan _____ (date completed)