

Muskegon Public Schools School Emergency Drills Documentation Form

School Year: 2019-2020

SCHOOL BUILDING INFORMATION				Name of Person Coordinating Drill: <u>Joy NASH</u>
<input type="checkbox"/> Lakeside	<input type="checkbox"/> Marquette	<input type="checkbox"/> MCEC	<input type="checkbox"/> MHS	
<input type="checkbox"/> MMS	<input type="checkbox"/> Moon	<input checked="" type="checkbox"/> Nelson	<input type="checkbox"/> Oakview	Title of Person Coordinating Drill: <input checked="" type="checkbox"/> Dean of Students <input type="checkbox"/> Principal <input type="checkbox"/> _____
Date of Drill: <u>9/12/19</u>				

TYPE & TIME OF DRILL

Type of Drill	Time of Drill			
	Standard	Class Change	Lunch/Recess	Other Time
Fire Drill Minimum of 5 required: At least 3 by December 1 At least 2 after December 1				
Tornado Drill (Severe Weather) Minimum of 2 required				
Lock Down/Shelter in Place Drill ** Minimum of 2 required At least 1 by December 1 At least 1 after January 1				
AED/Cardiac Emergency Response (Automated External Defibrillator) Minimum of 1 required	9:10 AM			

- At least 1 of the above performed drills is required to occur during a lunch or recess period or at another time when a significant number of the students are gathered but not in the classroom
- Schools shall not conduct a drill at a time that would interfere with the conducting of a state mandated assessment
- A Lockdown/Shelter In-Place drill shall include security measures that are appropriate to an emergency such as the release of a hazardous material or the presence of a potentially dangerous individual on or near the premises.

DRILL DETAIL

List Exact time required to evacuate building/shelter/secure	minutes
List total number of participants including guest, itinerant staff	#
This drill report is documentation for emergency drill (circle one) <u>#1</u> 2 3 4 5 6 7 8 for the current school year.	
Remarks:	

DRILL COORDINATION

<u>Joy Nash</u>	<u>9/12/19</u>
(Signature of person coordinating drill)	Date

School: Please SCAN completed drill form to the Office of Student Services immediately following an emergency drill or actual emergency

- Student Services:**
- Forward to OTR to post completed report on school bldg. website within 30-school days of drill and maintain for 3-years
 - Scan completed **LOCKDOWN** (drills and actual) form only to:
 Richard Warner, P.E.M., B. A., Director
 Muskegon County Emergency Services
WarnerRi@co.muskegon.mi.us

Muskegon Public Schools

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School Year: 2019-2020

SCHOOL BUILDING INFORMATION				Name of Person Coordinating Drill: <u>JOY NASH</u>
<input type="checkbox"/> Lakeside	<input type="checkbox"/> Marquette	<input type="checkbox"/> MCEC	<input type="checkbox"/> MHS	
<input type="checkbox"/> MMS	<input type="checkbox"/> Moon	<input checked="" type="checkbox"/> Nelson	<input type="checkbox"/> Oakview	Title of Person Coordinating Drill: <input checked="" type="checkbox"/> Dean of Students <input type="checkbox"/> Principal <input type="checkbox"/> _____
Date of Drill: <u>9/16/19</u>				

TYPE & TIME OF DRILL				
Type of Drill	Time of Drill			
	Standard	Class Change	Lunch/Recess	Other Time
Fire Drill Minimum of 5 required: At least 3 by December 1 At least 2 after December 1	<u>10:20-10:25</u> X			
Tornado Drill (Severe Weather) Minimum of 2 required				
Lock Down/Shelter in Place Drill ** Minimum of 2 required At least 1 by December 1 At least 1 after January 1				
AED/Cardiac Emergency Response (Automated External Defibrillator) Minimum of 1 required				

- At least 1 of the above performed drills is required to occur during a lunch or recess period or at another time when a significant number of the students are gathered but not in the classroom
- Schools shall not conduct a drill at a time that would interfere with the conducting of a state mandated assessment
- A Lockdown/Shelter In-Place drill shall include security measures that are appropriate to an emergency such as the release of a hazardous material or the presence of a potentially dangerous individual on or near the premises.

DRILL DETAIL	
List Exact time required to evacuate building/shelter/secure	5 minutes
List total number of participants including guest, itinerant staff	# <u>280</u>
This drill report is documentation for emergency drill (circle one) <u>(#1)</u> 2 3 4 5 6 7 8 for the current school year.	
Remarks:	

DRILL COORDINATION	
<u>Joy Nash</u> (Signature of person coordinating drill)	<u>9/16/19</u> Date
School: <input checked="" type="checkbox"/> Please SCAN completed drill form to the Office of Student Services immediately following an emergency drill or actual emergency	

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<input type="checkbox"/> Lakeside	<input type="checkbox"/> Marquette	<input type="checkbox"/> MCEC	<input type="checkbox"/> MHS	
<input type="checkbox"/> MMS	<input type="checkbox"/> Moon	<input checked="" type="checkbox"/> Nelson	<input type="checkbox"/> Oakview	Title of Person Coordinating Drill: <input checked="" type="checkbox"/> Dean of Students <input type="checkbox"/> Principal <input type="checkbox"/> _____
Date of Drill: <u>11/4/19</u>				

TYPE & TIME OF DRILL				
Type of Drill	Time of Drill			
	Standard	Class Change	Lunch/Recess	Other Time
Fire Drill Minimum of 5 required: At least 3 by December 1 At least 2 after December 1	3:05-3:09 X			
Tornado Drill (Severe Weather) Minimum of 2 required				
Lock Down/Shelter in Place Drill ** Minimum of 2 required At least 1 by December 1 At least 1 after January 1				
AED/Cardiac Emergency Response (Automated External Defibrillator) Minimum of 1 required				

- At least 1 of the above performed drills is required to occur during a lunch or recess period or at another time when a significant number of the students are gathered but not in the classroom
- Schools shall not conduct a drill at a time that would interfere with the conducting of a state mandated assessment
- A Lockdown/Shelter In-Place drill shall include security measures that are appropriate to an emergency such as the release of a hazardous material or the presence of a potentially dangerous individual on or near the premises.

DRILL DETAIL	
List Exact time required to evacuate building/shelter/secure	4 minutes
List total number of participants including guest, itinerant staff	# 280
This drill report is documentation for emergency drill (circle one) #1 <u>2</u> 3 4 5 6 7 8 for the current school year.	
Remarks:	

DRILL COORDINATION

<u>Joy Nash</u> (Signature of person coordinating drill)	<u>11/4/19</u> Date
School: <input type="checkbox"/> Please SCAN completed drill form to the Office of Student Services immediately following an emergency drill or actual emergency	

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SCHOOL BUILDING INFORMATION	
<input type="checkbox"/> Lakeside <input type="checkbox"/> Marquette <input type="checkbox"/> MCEC <input type="checkbox"/> MHS <input type="checkbox"/> MMS <input type="checkbox"/> Moon <input checked="" type="checkbox"/> Nelson <input type="checkbox"/> Oakview	Name of Person Coordinating Drill: <u>Joy Nash</u>
Date of Drill: <u>11/6/19</u>	Title of Person Coordinating Drill: <input checked="" type="checkbox"/> Dean of Students <input type="checkbox"/> Principal <input type="checkbox"/> _____

TYPE & TIME OF DRILL				
Type of Drill	Time of Drill			
	Standard	Class Change	Lunch/Recess	Other Time
Fire Drill Minimum of 5 required; At least 3 by December 1 At least 2 after December 1				
Tornado Drill (Severe Weather) Minimum of 2 required				
Lock Down/Shelter in Place Drill ** Minimum of 2 required At least 1 by December 1 At least 1 after January 1	<u>9:35 - 9:48</u> X			
AED/Cardiac Emergency Response (Automated External Defibrillator) Minimum of 1 required				

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- Schools shall not conduct a drill at a time that would interfere with the conducting of a state mandated assessment
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DRILL DETAIL	
List Exact time required to evacuate building/shelter/secure	<u>13</u> minutes
List total number of participants including guest, itinerant staff	# <u>280</u>
This drill report is documentation for emergency drill (circle one) # <u>1</u> 2 3 4 5 6 7 8 for the current school year.	
Remarks:	

DRILL COORDINATION

<u>Joy Nash</u> (Signature of person coordinating drill)	<u>11/6/19</u> Date
School: <input type="checkbox"/> Please SCAN completed drill form to the Office of Student Services immediately following an emergency drill or actual emergency	

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<input type="checkbox"/> Lakeside	<input type="checkbox"/> Marquette	<input type="checkbox"/> MCEC	<input type="checkbox"/> MIIS
<input type="checkbox"/> MMS	<input type="checkbox"/> Moon	<input checked="" type="checkbox"/> Nelson	<input type="checkbox"/> Oakview
Date of Drill: <u>12/9/19</u>			Name of Person Coordinating Drill: <u>Joy Nash</u>
			Title of Person Coordinating Drill: <input checked="" type="checkbox"/> Dean of Students <input type="checkbox"/> Principal <input type="checkbox"/>

TYPE & TIME OF DRILL				
Type of Drill	Time of Drill			
	Standard	Class Change	Lunch/Recess	Other Time
Fire Drill <u>Minimum of 5 required;</u> At least 3 by December 1 At least 2 after December 1	<u>3:03-</u> <u>3:07</u>			
Tornado Drill (Severe Weather) <u>Minimum of 2 required</u>				
Lock Down/Shelter in Place Drill ** <u>Minimum of 2 required</u> At least 1 by December 1 At least 1 after January 1				
AED/Cardiac Emergency Response (Automated External Defibrillator) <u>Minimum of 1 required</u>				

- At least 1 of the above performed drills is required to occur during a lunch or recess period or at another time when a significant number of the students are gathered but not in the classroom
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DRILL DETAIL	
List Exact time required to evacuate building/shelter/secure	<u>4</u> minutes
List total number of participants including guest, itinerant staff	# <u>280</u>
This drill report is documentation for emergency drill (circle one) # 1 2 <u>3</u> 4 5 6 7 8 for the current school year.	
Remarks:	

DRILL COORDINATION

Joy Nash _____ 12/9/19 _____
 (Signature of person coordinating drill) Date

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