

Post-Incident and Exercise Review

GENESEE COUNTY EMERGENCY DRILLS FOR SCHOOLS DOCUMENTATION FORM*

Type of Drill

- Fire Drill/Evacuation (5 required)
 Tornado (2 required)
 Lock Down and/or Shelter in Place Drill (3 required)

Time of Drill

- Standard
 Class Change
 Recess
 Lunch

School District: WAY Academy - Flint

School Year: 2020-21

School: WAY Academy

Local Fire or Law Enforcement Agency: _____

School Safety Officer (if applicable): _____

Date of Drill: 5-11-21 Time: 8:45 am

Exact Time Required to Evacuate/Shelter/Secure: 39 sec

Total Participants: 10

Remarks: _____

This report is for emergency drill # 5 of total 5 (Fire (5), Tornado (2), Lock Down or Shelter in Place (3))

Name of person conducting drill: Shelly Smith Title: Director

Signature of person conducting drill: Shelly Smith

Public Safety Agency Present at Time of Drill (if applicable):

Name and Title/Department: _____

*FOR INTERNAL DOCUMENTATION PURPOSES ONLY. Use the information from this Post-Incident and Exercise Review to update the Drill Documentation Form for public posting on the district's website.