School Emergency Drills Documentation Form

Type of Drill		Time of Drill
Fin Fin	e Drill (6 required)	X Standard
То	rnado Drill (2 required)	Class Change
∑ Lo	ck Down/Shelter in Place	Recess
Dr	ill (2 required)	Other Events
Name of reporting school: Cross Lutheran School		
Date of drill: 5-21-25 Time drill was held: 9:55 (am/pm)		
Exact time required to evacuate/shelter/secure: 1:54.24		
Total Participants: 100		
Remarks:		
This report is for emergency drill # for school year2024/2025		
Name of person conducting drill: Karen Kunisch		
Title of person conducting drill: Secretary		
Signature of person conducting drill:		
Drill was coordinated with: Huron County Emergency Management		
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X	Emergency Management Coordinator Name & title: Randy Miller, Director	
	AND	
	Law Enforcement (county sheriff or chief of police or designee or MSP) Name & title:	
	OR	
	Fire (Fire Chief or designee) Name & title:	