## AREA SCHOOLS Documentation Form

74500 Burk Street, Armada, Michigan 48005 · (586) 784-2112 · FAX: (586) 784-9592

**Time of Drill** 

Type of Drill

	Fire Drill (5 Required)		Standar	rd	
l	☐ Tornado Drill (2 Required)		Class Cl	nange	
	Lockdown Drill (3 Required)		Recess		
			Other E	vent	
			Other C	vent	
Name of Reporting School: (Click to select school)					
	Date of Drill: 03/24/23 Time of drill: 9:45 am	Exact time required to se	cure: <u>1:</u>	40 Total Participar	nts: <u>535</u>
Remarks:					
•					
This report is for emergency drill $\#^{4 \text{ or } 5}$ for the school year of $2022-2023$					
ļ	Name of person conducting drill: Mark J. Goscie	ewski			
7	Fitle of person conducting drill: Associate Princ	ipal			
5	Signature of person conducting drill:				•
[	Orill was coordinated with:		(F		
i	Emergency Management Coordinator			<b>Building Prin</b>	cipal
	Name & Title: Tim Woelkers - AAS Security	y Director		~ /-	
į	Law Enforcement (Chief or designee)			X   X	· · · · · ·
	<sub>Name &amp; Title:</sub> Richard Maierle - Armad	a Police		Signature	
	Fire (Chief or designee)			3/27/23	)
	Name & Title: Chief Krotche - ATFD		-	Date	
		<del></del>			