AREA SCHOOLS Documentation Form

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

Type of Drill	Time of Drill
Fire Drill (5 Required)	dard
☐ Tornado Drill (2 Required) ☐ Clas:	S Change
☐ Lockdown Drill (3 Required) ☐ Rece	955
□ Othe	er Event
Armada Hijh Johan Name of Reporting School: (Click to select school)	
value of reporting serious.	
Date of Drill: 03/19/25 Time of drill: 9:45 am Exact time required to secure:	1:25 Total Participants: 505
Remarks:	
This report is for emergency drill # for the school year of 2024-2025	
Name of person conducting drill: Mark Gosciewski	
itle of person conducting drill: Associate Principal	
ignature of person conducting drill:	
Fill was coordinated with: Emergency Management Coordinator	Building Principal
orill was coordinated with:	Building Principal
Emergency Management Coordinator Name & Title: Tim Woelkers - AAS Security Dir Law Enforcement (Chief or designee)	
Name & Title: Tim Woelkers - AAS Security Dir	Building Principal Signature
Drill was coordinated with: Emergency Management Coordinator Name & Title: Tim Woelkers - AAS Security Dir Law Enforcement (Chief or designee)	