AREA SCHOOLS Documentation Form

74500 Burk Street, Armada, Michigan 48005 · (586) 784-2112 · FAX: (586) 784-9592			
Type of Drill		Time of Drill	
☐ Fire Drill (5 Required)		Standard	
☐ Tornado Drill (2 Required)		Class Change	
Lockdown Drill (3 Required)		Recess	
		1 Other Event	
Armada Wik			<u>J</u>
Name of Reporting School: (Glick to select school			
Date of Drill: 09/25/24 Time of drill: 12:35 am Exact time required to secure: 0:35 Total Participants: 495			
temarks:		·	
This report is for emergency drill #\frac{1 of 3}{2} for the school of the school o		<u>5</u>	
itle of person conducting drill: Associate Prince	cipal	-	
ignature of person conducting drill:	/	51gn 114rc)	
Prill was coordinated with: Emergency Management Coordinator		Building Pri	ncipal
Name & Title: Tim Woelkers - AAS Securi	ity Dir	1	_
Law Enforcement (Chief or designee) Name & Title: Richard Maierle - Arma	. ,	Senature 9/3/24	
Fire (Chief or designee) Name & Title: Kevin Kanehl - ATFD		Date	