

DAKOTA MILESTONES

\_\_\_\_\_ Fire Drill Evaluation Form

\_\_\_\_\_ Tornado Drill Evaluation Form

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ AM/PM FACILITY: \_\_\_\_\_

Did the alarm system operate correctly? Yes / No Comment: \_\_\_\_\_

Location of alarm pulled used: \_\_\_\_\_

EVACUATION PLAN:

Time to evacuate (fire) or get to safe area (tornado) : \_\_\_\_\_

Did everyone get to the safe area ( fire ) or ( tornado)? Yes / No

Comments on any problems:

EXITS:

Special evacuation conditions (exits blocked, etc.): \_\_\_\_\_

Escape paths used: \_\_\_\_\_

Were the exits used correctly? Yes / No

Comments on any corrections needed in using the correct EXIT: \_\_\_\_\_

PARTICIPANTS:

Staff/Titles on duty: \_\_\_\_\_

Initials of individuals taking part in drill: \_\_\_\_\_

Initials of individuals not taking part in drill. List reason (s) for not taking part: \_\_\_\_\_

Signature/Title of person conducting Drill: \_\_\_\_\_

Follow-up: \_\_\_\_\_

\_\_\_\_\_  
Executive Director

Revised 8/29/06