

School Drill Observation Form

Problems Encountered (Check all that apply)	
<ul style="list-style-type: none"><input type="checkbox"/> Congestion in hallways<input type="checkbox"/> Alarm not heard<input type="checkbox"/> Students unsure of proper procedures<input type="checkbox"/> Staff unsure of proper procedures<input type="checkbox"/> Use of personal technologies by students<input type="checkbox"/> Use of personal technologies by staff<input type="checkbox"/> Unable to lock doors<input type="checkbox"/> Windows not covered<input type="checkbox"/> Windows left open<input type="checkbox"/> Doors left open<input type="checkbox"/> Difficulties with evacuation of students or staff with disabilities<input type="checkbox"/> Staff and adults unaccounted for<input type="checkbox"/> Students unaccounted for<input type="checkbox"/> Staff not serious about drill<input type="checkbox"/> Students not serious about drill	<ul style="list-style-type: none"><input type="checkbox"/> Radio communication problems<input type="checkbox"/> Network/computer problems<input type="checkbox"/> Weather-related problems<input type="checkbox"/> Noise impedes communications<input type="checkbox"/> Students not out of sight (safety/security drill)<input type="checkbox"/> Long time to evacuate building<input type="checkbox"/> Frightened students (safety/security drill)<input type="checkbox"/> Improper or unavailable supplies<input type="checkbox"/> Confusion<input type="checkbox"/> Doors or exits blocked<input type="checkbox"/> Transportation issues<input type="checkbox"/> Interagency communication issues<input type="checkbox"/> Incident command problems<input type="checkbox"/> Other: _____

Weather Conditions	
<ul style="list-style-type: none"><input type="checkbox"/> Clear<input type="checkbox"/> Cloudy<input type="checkbox"/> Raining<input type="checkbox"/> Rain and wind	<ul style="list-style-type: none"><input type="checkbox"/> Windy<input type="checkbox"/> Snow/sleet<input type="checkbox"/> Hot (above 80 degrees)<input type="checkbox"/> Cold (10 to 40 degrees)

Plans for Improvement	
<ul style="list-style-type: none"><input type="checkbox"/> Additional staff training<input type="checkbox"/> Additional student training<input type="checkbox"/> Address need for additional equipment<input type="checkbox"/> Improved emergency supplies	<ul style="list-style-type: none"><input type="checkbox"/> Cooperative planning with responders<input type="checkbox"/> Revised emergency procedures<input type="checkbox"/> Improved communication<input type="checkbox"/> Other: _____

Additional Comments