

## School Drill Documentation Form

Type of Drill	Number/Schedule
Fire	Five drills – Three must be completed by December 1
Tornado	Two drills – One must be completed in March
Safety/Security	Three drills – One must be completed prior to December 1 and one after January 1 <ul style="list-style-type: none"> <li>One drill shall include security measures that are appropriate to an emergency, such as the release of a hazardous material.</li> <li>One drill shall include security measures of a potentially dangerous individual on or near the school premises.</li> <li>Seek input from the administration of the school and local public safety on the nature of the drill.</li> </ul>

Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian School - Elem

Principal: Mrs Jodi Arnst

Date of drill: 8-25-2023 Number of students: 104 Number of staff: 16

Time initiated: 2:30 (a.m./p.m.) Time concluded: 2:33 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for: \_\_\_\_\_ Fire drill number (1) 2 3 4 5 for the 2023/2024 school year  
(circle number next to applicable drill)

Tornado drill number 1 2 for the 2023/2024 school year

Safety/Security drill number 1 2 3 for the 2023/2024 school year

Name of person conducting drill: Jodi Arnst

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 8-25-2023

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

*Must post on the school's website within 30 days after completing the drill.  
 The form must be maintained on the school website for at least three years.*

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian School - Elem

Principal: Mrs. JODI ARNST

Date of drill: 8-28-2023 Number of students: 106 Number of staff: 16

Time initiated: 12:47 (a.m./p.m.) Time concluded: 12:50 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input checked="" type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: Students were outside building and had to come inside to their safety room.

This report is for: Fire drill number **1 2 3 4 5** for the 2023/2024 school year  
(circle number next to applicable drill)

Tornado drill number **① 2** for the 2023/2024 school year

Safety/Security drill number **1 2 3** for the 2023/2024 school year

Name of person conducting drill: JODI ARNST

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 8-28-2023

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian School - Elem

Principal: Mrs. JODI ARNST

Date of drill: 8-30-2023 Number of students: 130 Number of staff: 116

Time initiated: 2:33 (a.m./~~p.m.~~) Time concluded: 2:35 (a.m./~~p.m.~~)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input checked="" type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: fixed a door that wasn't latching correctly.

This report is for:  
(circle number next to applicable drill)

Fire drill number **1** **2** **3** **4** **5** for the 2023/2024 school year

Tornado drill number **1** **2** for the 2023/2024 school year

Safety/Security drill number **(1)** **2** **3** for the 2023/2024 school year

Name of person conducting drill: JODI ARNST

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 8-30-2023

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian School

Principal: Mrs. Jodi Arnst

Date of drill: 8-31-2023 Number of students: 116 Number of staff: 15

Time initiated: 10:49 (a.m./p.m.) Time concluded: 10:53 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input checked="" type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for: \_\_\_\_\_ Fire drill number 1 ② 3 4 5 for the 2023/2024 school year  
(circle number next to applicable drill)  
Tornado drill number 1 2 for the 2023/2024 school year  
Safety/Security drill number 1 2 3 for the 2023/2024 school year

Name of person conducting drill: Jodi Arnst

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 8-31-2023

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian School

Principal: Mrs. Jodi ARNST

Date of drill: 9-7-2023 Number of students: 118 Number of staff: 18

Time initiated: 2:39 (a.m./p.m.) Time concluded: 2:43 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for:  
(circle number next to applicable drill)

Fire drill number 1 2 3 4 5 for the 2023/2024 school year

Tornado drill number 1 2 <sup>Extra Drill</sup> for the 2023/2024 school year

Safety/Security drill number 1 2 3 for the 2023/2024 school year

Name of person conducting drill: JODI ARNST

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 9-7-2023

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian School

Principal: JODI ARNST

Date of drill: 9-28-2023 Number of students: 109 Number of staff: 20

Time initiated: 2:39 (a.m./p.m.) Time concluded: 2:41 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: hazardous materials drill: shut windows  
seal rooms

This report is for:  
 (circle number next to applicable drill)

Fire drill number **1 2 3 4 5** for the 2023/2024 school year

Tornado drill number **1 2** for the 2023/2024 school year

Safety/Security drill number **1 (2) 3** for the 2023/2024 school year

Name of person conducting drill: Mrs. JODI ARNST

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 10/2/2023

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.	

School: Genesee Christian School

Principal: Mrs. Jodi Arnst

Date of drill: Nov 1, 2023 Number of students: 128 Number of staff: 15

Time initiated: 2:31 (a.m./p.m.) Time concluded: 2:34 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for:  
(circle number next to applicable drill)

Fire drill number 1 2 **3** 4 5 for the 2023/2024 school year

Tornado drill number 1 2 for the 2023/2024 school year

Safety/Security drill number 1 2 3 for the 2023/2024 school year

Name of person conducting drill: Jodi Arnst

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: Nov 1, 2023

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian Elementary School

Principal: Mrs. JODI ARNST

Date of drill: 2-6-2024 Number of students: 115 Number of staff: 25

Time initiated: 9:13 (a.m./p.m.) Time concluded: 9:17 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for:  
 (circle number next to applicable drill)

Fire drill number **1 2 3 4 5** for the 2023/2024 school year

Tornado drill number **1 2** for the 2023/2024 school year

Safety/Security drill number **1 2 (3)** for the 2023/2024 school year

Name of person conducting drill: Mrs. JODI ARNST

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 2-6-2024

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.	

School: Genesee Christian School

Principal: Mrs. Jodi Arnst

Date of drill: March 6, 2024 Number of students: 118 Number of staff: 15

Time initiated: 9:33 (a.m./p.m.) Time concluded: 9:37 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for: \_\_\_\_\_ Fire drill number **1 2 3 4 5** for the 2023/2024 school year  
(circle number next to applicable drill)

Tornado drill number **1 2** for the 2023/2024 school year

Safety/Security drill number **1 2 3** for the 2023/2024 school year

Name of person conducting drill: Mrs. Jodi Arnst

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: March 19, 24

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Genesee Christian School

Principal: Mrs. Jodi Arnst

Date of drill: 4-25-24 Number of students: 116 Number of staff: 18

Time initiated: 9:05 (a.m./p.m.) Time concluded: 9:09 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: 1:35 to evacuate

This report is for:  
(circle number next to applicable drill)

Fire drill number 1 2 3 **4** 5 for the 2023/2024 school year

Tornado drill number 1 2 for the 2023/2024 school year

Safety/Security drill number 1 2 3 for the 2023/2024 school year

Name of person conducting drill: Mrs. Jodi Arnst

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 4-25-24

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.	

School: Genesee Christian Elementary

Principal: Mrs. JODI ARNST

Date of drill: 5-6-2024 Number of students: 127 Number of staff: 13

Time initiated: 2:35 (a.m./p.m.) Time concluded: 2:37 (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input checked="" type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks: \_\_\_\_\_

This report is for: \_\_\_\_\_ Fire drill number 1 2 3 4 5 for the 2023/2024 school year  
(circle number next to applicable drill)

Tornado drill number 1 2 for the 2023/2024 school year

Safety/Security drill number 1 2 3 for the 2023/2024 school year

Name of person conducting drill: Mrs. JODI ARNST

Title of person conducting drill: Principal

Signature or person conducting drill: Jodi Arnst Date: 5-6-2024

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_

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