

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"> One drill shall include security measures that are appropriate to an emergency, such as the release of a hazardous material. One drill shall include security measures of a potentially dangerous individual on or near the school premises. Seek input from the administration of the school and local public safety on the nature of the drill.
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: Rob Buchalski

Date of drill: 9/12/23 Number of students: 177 Number of staff: 19

Time initiated: 10:16 am (a.m./p.m.) Time concluded: 10:18 am (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time * 3rd hour	<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 was the first tornado drill of the year.

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

Fire drill number **1 2 3 4 5** for the 2022/2023 school year

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Rob Buchalski/Michelle Mein

Title of person conducting drill: Administrator/Assistant Principal

Signature or person conducting drill: _____ Date: 9/12/23

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

Principal: Rob Buchalski

Date of drill: 9/15/23 Number of students: 171 Number of staff: 19

Time initiated: 10:15 am (a.m./p.m.) Time concluded: 10:17 am (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time - 3rd hour	<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 was our 1st fire drill. Time was 2 min. 20 seconds.

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

Fire drill number **1 2 3 4 5** for the 2022/2023 school year

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Rob Buchalski/Michelle Mein

Title of person conducting drill: Administrator/Assistant Principal

Signature or person conducting drill: _____ Date: _____

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: Rob Buchalski

Date of drill: 9/26/23 Number of students: 180 Number of staff: 19

Time initiated: 10:00 am (a.m./p.m.) Time concluded: 10:02 am (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time 3rd hour	<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 was our first Safety/Security drill of the year.

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

Fire drill number **1 2 3 4 5** for the 2022/2023 school year

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Rob Buchalski/Michelle Mein

Title of person conducting drill: Administrator/Assistant Principal

Signature or person conducting drill: _____ Date: _____

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: Rob Buchalski

Date of drill: 10/18/23 Number of students: 178 Number of staff: 23

Time initiated: 1:26 pm (a.m./p.m.) Time concluded: 1:29 pm (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time 6th hour	<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 was fire drill #2.

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

Fire drill number **1 2 3 4 5** for the 2022/2023 school year

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Rob Buchalski/Michelle Mein

Title of person conducting drill: Administrator/Assistant Principal

Signature or person conducting drill: _____ Date: 10/18/23

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: Mr. Rob Buchalski

Date of drill: 11/9/23 Number of students: 174 Number of staff: 19

Time initiated: 1:25 pm (a.m./p.m.) Time concluded: 1:27 pm (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time 6th hour	<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 was our 3rd fire drill

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

Fire drill number **1 2 3 4 5** for the 2022/2023 school year

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Rob Buchalski/Michelle Mein

Title of person conducting drill: Administrator/Assistant Principal

Signature or person conducting drill: _____ Date: 11/9/23

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: Rob Buchalski

Date of drill: 1/11/24 Number of students: 177 Number of staff: 19

Time initiated: 1:26 pm (a.m./p.m.) Time concluded: 1:28 pm (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time yes - 6th hr	<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 is our second lockdown drill for the year.

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

Fire drill number **1 2 3 4 5** for the 2022/2023 school year

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Rob Buchalski/Michelle Mein

Title of person conducting drill: Administrator/Assistant Principal

Signature or person conducting drill: _____ Date: 1/11/24

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: Rob Buchalski

Date of drill: 3/20/24 Number of students: 173 Number of staff: 18

Time initiated: 12:48 pm (a.m./p.m.) Time concluded: 12:50 pm (a.m./p.m.)

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time YES	<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 was our second tornado drill of the year, coinciding with the statewide tornado drill.

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

Fire drill number **1 2 3 4 5** for the 2022/2023 school year

Tornado drill number **1 2** for the 2022/2023 school year

Safety/Security drill number **1 2 3** for the 2022/2023 school year

Name of person conducting drill: Michelle Mein

Title of person conducting drill: Assistant Principal

Signature or person conducting drill: _____ Date: 3/20/24

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: Rob Buchalski

Date of drill: 4/2/24 Number of students: 175 Number of staff: 18

Time initiated: 11:52 am (a.m./p.m.) Time concluded: 11:55 am (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: Rob Buchalski, Ron O'Neil

Title of person conducting drill: Administrator, Safety Resource Officer

Signature or person conducting drill: Rob Buchalski Date: 4/2/24

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: Rob Buchalski

Date of drill: 4/2/24 Number of students: 175 Number of staff: 18

Time initiated: 11:52 am (a.m./p.m.) Time concluded: 11:55 am (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: Rob Buchalski, Ron O'Neil

Title of person conducting drill: Administrator, Safety Resource Officer

Signature or person conducting drill: Rob Buchalski Date: 4/2/24

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: Rob Buchalski

Date of drill: 4/15/24 Number of students: 185 Number of staff: 21

Time initiated: 1:34 pm (a.m./p.m.) Time concluded: 1:36 pm (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: Michelle Mein

Title of person conducting drill: Assistant Principal

Signature or person conducting drill:  Date: 4/15/24

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: Rob Buchalski

Date of drill: 5/7/24 Number of students: 185 Number of staff: 19

Time initiated: 2:17 pm (a.m./p.m.) Time concluded: 2:19 pm (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 was fire drill #5 for the year.

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: Rob Buchalski/Michelle Mein

Title of person conducting drill: Administrator/Assistant Principal

Signature or person conducting drill: _____ Date: 5/7/24

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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 The form must be maintained on the school website for at least three years.*