

Documentation Form

74500 Burk Street, Armada, Michigan 48005 • (586) 784-2112 • FAX: (586) 784-9592

		= r			a
	Type of Drill			e of Drill	
	Fire Drill (5 Required)		⊠ Standard		
	Tornado Drill (2 Required)		Class Cha	ange	
	Lockdown Drill (3 Required)		Recess		
			☐ Other Ev	ent	
L					9
Name of Repo	rting School: Armada Middle Scho	ool			
Date of Drill: $3/6/18$ Time of Drill: $1:10 \text{ pm}$ Exact time required to secure: $1:40$ Total Participants: 368					
. No.					
Remarks:					

This report is f	or emergency drill #4 for the s	school year of _2017-2	018		
Name of perso	on conducting drill:A	manda Lynch			
Title of person	conducting drill: Assis	stant Principal			
Signature of ne	erson conducting drill:	Indd U	nan		
Signature or po	erson conducting arm.	,011000			
Drill was coord	dinated with:		ſ		
 				<u>Building Pr</u>	<u>incipal</u>
	ncy Management Coordinator Title: _Nancy Buyle - MISD			Time	0,
		-		Signature	
	orcement (Chief or designee) Title: _Mike Patrick– Armada Polic			Jigilatare	
Name &	TITLE: WINC FACILIER ATTITUDE FOR	<u>.e</u>		3/6/18	
	ef or designee)			Date	
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