

## School Drill Documentation

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: Lansing Principal: Greg Morris

Date of drill: 9-24-25 Number of students: 63 Number of Staff: 12

Time initiated: 8:58  a.m.  p.m. Time concluded 8:57  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	<input checked="" 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: (check box next to applicable drill)

Fire drill number  1  2  3  4  5 for the 25-26 school year

Tornado drill number  1  2 for the \_\_\_\_\_ school year

Safety/Security drill number  1  2  3 for the \_\_\_\_\_ school year

Name of person conducting drill: Greg Morris

Title of person conducting drill: School leader

Signature or person conducting drill: [Signature] on behalf of G.M. Date: 11-24-25

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: Lansing Principal: Greg Morris

Date of drill: 10-15-2025 Number of students: 65 Number of Staff: 12

Time initiated: 11:05  a.m.  p.m. Time concluded 11:06  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: (check box next to applicable drill)

Fire drill number  1  2  3  4  5 for the 25-26 school year

Tornado drill number  1  2 for the \_\_\_\_\_ school year

Safety/Security drill number  1  2  3 for the \_\_\_\_\_ school year

Name of person conducting drill: Greg Morris

Title of person conducting drill: School Leader

Signature or person conducting drill: [Signature] on behalf of G.M. Date: 11-24-2025

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: Canning Principal: Greg Morris

Date of drill: 11-25-2025 Number of students: 54 Number of Staff: 11

Time initiated: 12:30  a.m.  p.m. Time concluded 12:32  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: (check box next to applicable drill)

Fire drill number  1  2  3  4  5 for the 25-26 school year

Tornado drill number  1  2 for the \_\_\_\_\_ school year

Safety/Security drill number  1  2  3 for the \_\_\_\_\_ school year

Name of person conducting drill: Kathleen Travis

Title of person conducting drill: Director

Signature or person conducting drill: [Signature] Date: 11-25-25

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: Lansing Principal: Marcelle Monchanin  
 Date of drill: 3-23-26 Number of students: 52 Number of Staff: 12  
 Time initiated: 10:45  a.m.  p.m. Time concluded 10:47  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	<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: (check box next to applicable drill)  
 Fire drill number  1  2  3  4  5 for the 25-26 school year  
 Tornado drill number  1  2 for the \_\_\_\_\_ school year  
 Safety/Security drill number  1  2  3 for the \_\_\_\_\_ school year

Name of person conducting drill: Marcelle Monchanin

Title of person conducting drill: School Leader

Signature or person conducting drill:  Date: 03/23/2026

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: \_\_\_\_\_  
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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: Lansing Principal: Marcelle Monchanin

Date of drill: 5-8-2026 Number of students: 47 Number of Staff: 11

Time initiated: 9:46  a.m.  p.m. Time concluded 9:42  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 checked="" 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: (check box next to applicable drill)

Fire drill number  1  2  3  4  5 for the 25-26 school year

Tornado drill number  1  2 for the \_\_\_\_\_ school year

Safety/Security drill number  1  2  3 for the \_\_\_\_\_ school year

Name of person conducting drill: Marcelle Monchanin

Title of person conducting drill: School Leader

Signature or person conducting drill:  Date: 05/08/2026

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: \_\_\_\_\_

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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: Cansing Principal: Marcelle Monchain

Date of drill: 3-4-2026 Number of students: 49 Number of Staff: 12

Time initiated: 12:30  a.m.  p.m. Time concluded 12:31  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: (check box next to applicable drill)

Fire drill number  1  2  3  4  5 for the \_\_\_\_\_ school year

Tornado drill number  1  2 for the 25-26 school year

Safety/Security drill number  1  2  3 for the \_\_\_\_\_ school year

Name of person conducting drill: Marcelle Monchain

Title of person conducting drill: School Leader

Signature or person conducting drill: [Signature] Date: 03/04/2026

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: Canning Principal: Marcelle Monchanin

Date of drill: 5-4-2026 Number of students: 38 Number of Staff: 11

Time initiated: 12:15  a.m.  p.m. Time concluded 12:16  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: (check box next to applicable drill)

Fire drill number  1  2  3  4  5 for the \_\_\_\_\_ school year

Tornado drill number  1  2 for the 25-26 school year

Safety/Security drill number  1  2  3 for the \_\_\_\_\_ school year

Name of person conducting drill: Marcelle Monchanin

Title of person conducting drill: School Leader

Signature or person conducting drill:  Date: 05/04/2026

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: \_\_\_\_\_

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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: Lansing Principal: Greg Morris  
Date of drill: 10-9-2025 Number of students: 51 Number of Staff: 12  
Time initiated: 9:35  a.m.  p.m. Time concluded 9:40  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: (check box next to applicable drill) Fire drill number  1  2  3  4  5 for the \_\_\_\_\_ school year  
Tornado drill number  1  2 for the \_\_\_\_\_ school year  
Safety/Security drill number  1  2  3 for the 25-26 school year

Name of person conducting drill: Greg Morris

Title of person conducting drill: School leader

Signature or person conducting drill: [Signature] on behalf of G.M. Date: 11-24-25

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: \_\_\_\_\_  
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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: LANSING Principal: MARCELLE Monchaoui  
 Date of drill: 2-3-2026 Number of students: 49 Number of Staff: 12  
 Time initiated: 10:30  a.m.  p.m. Time concluded 10:33  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 \_\_\_\_\_ school year  
 (check box next to applicable drill) Tornado drill number  1  2 for the \_\_\_\_\_ school year  
 Safety/Security drill number  1  2  3 for the 75-26 school year

Name of person conducting drill: Kathleen Travis

Title of person conducting drill: Director

Signature or person conducting drill: [Signature] Date: 2-3-2026

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: \_\_\_\_\_  
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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: Lansing Principal: Marcelle Monchanin

Date of drill: 3-16-2026 Number of students: 40 Number of Staff: 12

Time initiated: 10:45  a.m.  p.m. Time concluded 10:47  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 checked="" type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill)

Fire drill number  1  2  3  4  5 for the \_\_\_\_\_ school year

Tornado drill number  1  2 for the \_\_\_\_\_ school year

Safety/Security drill number  1  2  3 for the 25-26 school year

Name of person conducting drill: Marcelle Monchanin

Title of person conducting drill: School Leader

Signature or person conducting drill:  Date: 03/16/2026

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: \_\_\_\_\_

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