

Clayton County Fire Department SCHOOL FIRE EXIT DRILL REPORT

Name of School: _____

Address: _____

City: _____ State: Georgia Zip Code: _____

Phone Number: _____ FAX Number: _____

Date Of Drill: ____/____/____ Time Drill Initiated: _____

Total Number of Participants: Students _____ Staff _____

Evacuation Time (including establishing accountability once outside the building): ____ minutes ____ seconds

Principal's Name: _____ Principal's Signature: _____

Weather conditions when occupants were evacuated:

Other information relevant to the drill:

PLEASE FAX OR MAIL A COPY OF THIS REPORT TO:

Clayton County Fire Department
Attn: Fire Marshal's Office
7810 Highway 85
Riverdale, Ga. 30274
Phone: (770) 473-7833
FAX (770) 473-3837