

School Emergency Drills 2026-2027

Documentation Form

Type of Drill

- ☐ Fire Drill (5 required)
- ☐ Tornado Drill (2 required)
- ☒ Lock-Down/Shelter-in Place Drill (3 required)
Evacuate

Time of Drill

- ☒ Standard *10:00 am*
- ☐ Class Change
- ☐ Recess
- ☐ Other Events

Name of Reporting School: **EBENEZER CHRISTIAN SCHOOL**

Date of Drill: *10/8/26* Time drill was held: *10:00* (am/pm)

Total Participants: *27*

This report is for emergency drill # *1* of *3*.

Name of person conducting drill: **Carol Heine**

Title of person conducting drill: **Secretary**

Signature of person conducting drill: *Carol Heine*

Name of School Principal or Designee: **Pam Bekkering**

Signature of Principal or Designee: _____

Drill was coordinated with Law Enforcement (county sheriff or chief of police or designee or MSP)

Name and Title: *Pam Bekkering, Admin*

Date posted to website: *10-8-26*