

AOB Department of Schools

## RECORD OF DRILLS

Prescribed Under COMAR Sec. 13a.02.02.04, Emergency Plan

School Name:		School Telephone:			
School Location:					
	Street	City	County	Zip	
		ency Plans sets forth the spec t one of each of the following			
TYPE OF DR	ILL	MONTH/DAY DR	ILL CONDUCTED		
Evacuation				_	
Shelter in	Place			_	
Reverse Ev	racuation				
Lock Down	1			- -	
Drop, Cove	er and Hold			_	
_					

Each of the prescribed drills is to be conduct once annually, except for the Lock Down Drill. Three lockdown drills are conducted annually, with one drill conducted each trimester. The initial drill is to be an

educational exercise for the school on the lock down process. The remaining two drills are to include completing the actual process of locking the school down.

This log is maintained throughout the school year and then must be uploaded to the Advance ED E/Prove system under the applicable assurance. The log must be uploaded to the assurance section of the system <u>no later than</u> the beginning of the next school year.

## **CERTIFICATION OF COMPLIANCE:**

I hereby certify that the information provided herein is true and correct.				
(Printed Name)	Signature:			
(Title)	Date:			