



NEW HAVEN PUBLIC SCHOOLS

Rev. 9.2022SM

SCHOOL FIRE DRILL CHECKLIST

NOTIFY SECURITY DEPARTMENT OF THE FIRE DRILL PHONE: 475-220-1681

School Name: _____

Date: _____

Drill Date: _____

Start Time: ____:____ End Time: ____:____

Time of Expiration: ____ Minutes ____ Seconds

Conducted By: _____

DIRECTIONS: Evaluate each school with respect to each question by placing an "X" in the columns labeled Satisfactory or Unsatisfactory. Please, be specific with your reason for Satisfactory or Unsatisfactory in the comment area.

Table with 3 columns: Question, Satisfactory, Unsatisfactory. Rows include: Hand Rails, Fire Escapes, Fire Escape Doors, Exit Doors, Fire Alarm (Gongs or Horns), Stairs, *Reception of Signal at Fire Headquarters, *Steps taken in the event of Unsatisfactory Reception - Please Describe: (with Time Corrected field), Additional Comments, and Work Order #.

Principal's Signature: _____

PLEASE EMAIL THIS COMPLETED FROM TO: Drills@new-haven.k12.ct.us