

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"> • One drill shall include security measures that are appropriate to an emergency, such as the release of a hazardous material. • One drill shall include security measures of a potentially dangerous individual on or near the school premises. • Seek input from the administration of the school and local public safety on the nature of the drill. |

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: Siebert Elementary Principal: Katie Rinke

Date of drill: 1-26-26 Number of students: 651 Number of Staff: 79

Time initiated: 12:21 a.m. p.m. Time concluded 12:30 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 2025-26 school year

Tornado drill number 1 2 for the 2025-26 school year

Safety/Security drill number 1 2 3 for the 2025-26 school year

Name of person conducting drill: Katie Rinke

Title of person conducting drill: Siebert Principal

Signature or person conducting drill: Katie Rinke Date: 1-26-26

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: Midland Police Department Name: _____ Title: School Resource Officer

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.*

emailed 4/20/21