DRILL FEEDBACK FORM

Name ________________________________  Room Number/ Location ____________________

Optional                                         Optional

Type of Drill _______________________________  Drill Date ________________

Which of the following categories best describes your position or role?

- [ ] Administrative support staff
- [ ] Nurse
- [ ] Teaching Staff
- [ ] Substitute
- [ ] Non Teaching Staff(Cafeteria, Maintenance)
- [ ] Other, please specify: __________________

Before The Drill

1. Do you feel you received enough information and/or training to perform this drill?  □Yes  □No
2. Did you know the drill was happening, in advance?  □Yes  □No
   a. If so, how many days/hours in advance were you notified? _______d _______h
3. Did students know the drill was happening, in advance?  □Yes  □No
   a. If so, how many days/hours in advance were they notified? _______d _______h

During The Drill

1. Could you clearly hear the announcement for the drill?  □Yes  □No
   a. If no, what area of the school were you located in? __________________
2. Did you understand the instructions that were announced?  □Yes  □No
   a. If code was used, did you (check one):
      - [ ] Immediately know what the code instructed you to do
      - [ ] Had to think about it, first. Then remembered
      - [ ] Referenced your classroom guide to remind you
      - [ ] Did not know what to do
3. Did students understand what the emergency notification meant?  □Yes  □No
4. Did you or other staff follow procedures for students and staff in hallways, bathrooms and open areas?  □Yes  □No
   a. Did you pull any students into your classroom?  □Yes  □No
   b. Were the hallways clear?  □Yes  □No
5. Were you able to lock your classroom doors during a lockdown?  □Yes  □No
   a. Was everyone out of sight from the door during the drill?  □Yes  □No
6. If you evacuated did students remain quiet and calm?  □Yes  □No
   a. Did you bring necessary items with you?  □Yes  □No
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After the Drill

1. Was there an “All Clear” message delivered to terminate the drill? □ Yes □ No
   a. Could you clearly hear the “all clear” announcement? □ Yes □ No

2. What was the most valuable part of this drill/exercise?

3. Is there anything your class did exceptionally well that you would like to share with us?

4. Were any weaknesses identified that we should reassess or address more carefully to assist in keeping everyone safe? □ Yes □ No
   If so, explain.

5. Did anyone (i.e: staff, students, visitors) have any new ideas that you would like to share with us on how better to respond?

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<thead>
<tr>
<th>I am confident...</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>N/A</th>
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<tr>
<td>a. In my knowledge of the emergency response plan for my school</td>
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<td>b. In my knowledge of my responsibilities during an emergency</td>
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Any additional comments or concerns?

Thank you for your comments and for participating in the exercise.