**EMERGENCY DRILL AND EVALUATION REPORT**

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| **Nature of Incident/Drill:** | | |
| **Facility Location:** | | |
| **Scheduled Drill (complete information below)** | | **Actual Emergency (complete information below)** |
| Date of Emergency Drill (DD/MM/YYYY) | | Date of Emergency (DD/MM/YYYY) |
| Time: | | Time: |
| Date of Security Notification (fire drill only) | | Date Accident Investigation Report Completed (DD/MM/YY) |
| Date of Fire Dept. Notification (fire drill only) | |  |
| **Evacuation Response Time:**  (From alarm start until roll-call completed at meeting place.)  \*\*If not applicable write ‘N/A’. For example, not required if no evacuation occurred. | | |
| **Time: Started** | **Time: Completed** | |
| **Notes:** *(Injuries, property damage, etc.?)* | | |
| **Analysis:** *(What went right? What went wrong?)* | | |
| **Recommended Corrective Actions:** *(What can be done to make the responses better next time?)* | | |
| **Executive Sign Off:** | | |
| **Date:** | | |