

Center Fire Drill Log

Fire evacuation drills must be conducted monthly. Please Write Clearly

Center/Program Name _____

Fire Drill Log					
Date & Day of Week	Time	# of Children Present	Individual Supervising Drill	Length of Time to Evacuate	Problems Encountered and Remediation
___/___/___ Day: _____					
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This form is provided for technical assistance purposes only. Providers may use this form if they choose, but are not required to use this form.