RECORD OF UNANNOUNCED FIRE DRILL

6400.112

Date:	_Day:_		Time:	AM	PM	
Semi-Annual Sleep Drill?	_Yes	No				
Alarm Sounded?	_Yes	No				
*Alarm Operative?	_Yes	No				
Hypothetical Location of Fire:						
Response of People Involved:				·		
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Any Problems Encountered?		_ If yes, expla	in:			_
Exit Route Used:						
Designated Safe Area:						
Evacuation Time:						
Discussion Following Drill:				W-P-		

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Staff Present:			Residents 1	Present:		
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Signature of Person Conducting Drill						

*All smoke detectors whether interconnected or not must be tested for operability during or shortly following each drill.