



### EVACUATION AND LOCKDOWN RECORD

*This record should be completed as soon as practicable after an evacuation or lockdown event/procedure, but no later than 6 hours after the event/procedure*

DATE OF EVENT: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

TIME: \_\_\_\_\_ am/pm

UNPLANNED EVENT

SCHEDULED REHEARSAL

**EDUCATORS PRESENT:**


**VOLUNTEERS/VISITORS PRESENT:**


**ACTION TAKEN BY STAFF:**




**REFLECTION AND FUTURE ADJUSTMENT TO BE CONSIDERED:**

Focus Area	Person Responsible	Tick when completed

**FORM COMPLETED BY:**

Name:	Signature:
Date:	Time: