



Monthly Fire Drill Form

- Foster Home: _____ Date of Fire Drill: _____
- Outside meeting place: _____ Time of Fire Drill: _____
- Timeframe (Choose One):
 Midnight-6am 6am-Noon Noon-6pm 6pm-Midnight
- Length of time elapsed from moment of alarm until all areas cleared:

- Persons involved in evacuation:

- Did everyone evacuate the home? Yes No
- Location of any obstruction/barrier (i.e. blocking exit doorway, blocking hallway):

- Did any concerns or problems occur during fire drill? If yes, how will concern be resolved?

Person conducting fire drill: _____

Life Start, Inc. Social Worker: _____