

**FIRE DRILL FORM (to be completed monthly)**

**Timeframe** midnight-6am  
6am-noon  
noon-6pm  
6pm-midnight

Foster Home: \_\_\_\_\_

Date of Fire Drill \_\_\_\_\_ Time of Fire Drill \_\_\_\_\_

Outside meeting place: \_\_\_\_\_

Length of time elapsed from moment of alarm until all areas were clear: \_\_\_\_\_

Persons involved in evacuation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did everyone evacuate the home? If no, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Location of obstruction/barrier (i.e. blocking exit doorway, blocking hallway): \_\_\_\_\_  
\_\_\_\_\_

Did any concerns or problems occur during fire drill? If yes, how will you correct situation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person conducting fire drill: \_\_\_\_\_

LifeStart Casemanager: \_\_\_\_\_