

Fire Drill Response Form

Section 1: General Information

Date/Time Fire Drill conducted:

Building and Floor:

Your Name:

Section 2: Alarm Information

Time alarm set off:

Time alarm silenced:

Did all alarm devices on your floor activate?

Yes No

Section 3: Evacuation Information

Length of time to complete evacuation:

Did everyone in the building evacuate?

Yes No

Was the evacuation orderly?

Yes No

Were all occupant areas in the building checked?

Yes No

Did everyone proceed to the predetermined assembly area?

Yes No

Were the assembly areas a safe distance from the building?

Yes No

Did the evacuees meet and remain in their designated area until the "All Clear was given?"

Yes No

Additional Comments:

Any Comments or
Recommendations on
the Evacuation: