

Emergency Evacuation Drill

Title: _____

Severity: _____ Site: _____

Date / Time: _____ Completed by: _____

Drill Information

1 Date of drill *

2 Time drill initiated *

3 Type of emergency drill *

Fire

Chemical spill

Gas leak

Bomb threat

Severe weather

Intruder/lockdown

General evacuation

Other

4 Was this a planned or unannounced drill?

Planned

Unannounced

5 Drill coordinator name

Evacuation Details

6 Time alarm/alert was activated

7 Time building was fully evacuated

8 Total evacuation time (minutes)

9 Assembly point used

10 Were all exits accessible and used correctly?

Yes

No

N/A

11 Details of any blocked or inaccessible exits

Attendance and Accountability

12 Total number of people on site

13 Total number evacuated

14 Were all personnel accounted for at assembly point?

Yes

No

N/A

15 Details of anyone unaccounted for or requiring assistance

16 Were any visitors or contractors present?

Yes

No

N/A

17 Number of visitors/contractors evacuated

Emergency Equipment and Procedures

18 Did the alarm system function correctly?

Yes

No

N/A

19 Were fire wardens/marshals clearly identifiable?

Yes

No

N/A

20 Did fire wardens perform their duties effectively?

Yes

No

N/A

21 Was emergency lighting operational (if applicable)?

Yes

No

N/A

22 Were evacuation routes clearly marked and visible?

Yes

No

N/A

23 Was communication equipment working correctly?

Yes

No

N/A

Observations

24 How would you rate the overall evacuation?

Excellent

Good

Satisfactory

Needs improvement

Poor

25 Did staff follow correct evacuation procedures?

Yes

No

N/A

26 Were there any mobility or accessibility issues?

Yes

No

N/A

27 Details of accessibility issues encountered

28 General observations during the drill

29 Photos or video of the drill

Attach file here

Issues and Actions

30 Were any problems identified during the drill?

Yes

No

N/A

31 Description of problems identified

32 Corrective actions required

33 Person responsible for corrective actions

34 Target date for completing actions

Sign-off

35 Drill conducted by *

36 Drill conductor signature *

Signature

37 Date of report *

38 Manager/supervisor review required?

Yes

No

N/A

39 Manager/supervisor name

40 Manager signature

Signature

41 Additional comments
