

School Drill Documentation

Type of Drill	Number/Schedule
Fire	Five drills – Three must be completed by December 1
Tornado	Two drills – One must be completed in March
Safety/Security	Three drills – One must be completed prior to December 1 and one after January 1 <ul style="list-style-type: none">One drill shall include security measures that are appropriate to an emergency, such as the release of a hazardous material.One drill shall include security measures of a potentially dangerous individual on or near the school premises.Seek input from the administration of the school and local public safety on the nature of the drill.

Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 5/14/2025 Number of students: 140 Number of Staff: 14

Time initiated: 2:15 ☐ a.m. ☒ p.m. Time concluded 2:19 ☐ a.m. ☒ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill) Fire drill number ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☒ 5 for the 2024-2025 school year

Tornado drill number ☐ 1 ☐ 2 for the 2024-2025 school year

Safety/Security drill number ☐ 1 ☐ 2 ☐ 3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 5/14/2025

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

*Must post on the school's website within 30 days after completing the drill.
The form must be maintained on the school website for at least three years.*

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 4/29/2025 Number of students: 144 Number of Staff: 13

Time initiated: 1:30 ☐ a.m. ☒ p.m. Time concluded 1:34 ☐ a.m. ☒ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill) Fire drill number ☐1 ☐2 ☐3 ☒4 ☐5 for the 2024-2025 school year

Tornado drill number ☐1 ☐2 for the 2024-2025 school year

Safety/Security drill number ☐1 ☐2 ☐3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 4/29/2025

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 4/8/2025 Number of students: 140 Number of Staff: 13

Time initiated: 2:25 ☐ a.m. ☒ p.m. Time concluded 2:30 ☐ a.m. ☒ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: Fire drill number ☐1 ☐2 ☐3 ☐4 ☐5 for the 2024-2025 school year
(check box next to applicable drill)

Tornado drill number ☐1 ☒2 for the 2024-2025 school year

Safety/Security drill number ☐1 ☐2 ☐3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 4/8/2025

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 4/2/2025 Number of students: 144 Number of Staff: 15

Time initiated: 1:30 ☐ a.m. ☒ p.m. Time concluded 1:32 ☐ a.m. ☒ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill) Fire drill number ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 for the 2024-2025 school year

Tornado drill number ☐ 1 ☐ 2 for the 2024-2025 school year

Safety/Security drill number ☐ 1 ☐ 2 ☒ 3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael J. Sauter Date: 4/2/2025

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 3/18/2025 Number of students: 148 Number of Staff: 15

Time initiated: 9:32 ☒ a.m. ☐ p.m. Time concluded 9:35 ☒ a.m. ☐ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill) Fire drill number ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 for the 2024-2025 school year

Tornado drill number ☒ 1 ☐ 2 for the 2024-2025 school year

Safety/Security drill number ☐ 1 ☐ 2 ☐ 3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 3/18/25

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 3/7/2025 Number of students: 140 Number of Staff: 15

Time initiated: 12:45 ☐ a.m. ☒ p.m. Time concluded 12:47 ☐ a.m. ☒ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: Fire drill number ☐1 ☐2 ☐3 ☐4 ☐5 for the 2024-2025 school year
(check box next to applicable drill)

Tornado drill number ☐1 ☐2 for the 2024-2025 school year

Safety/Security drill number ☐1 ☒2 ☐3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 3/7/2025

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 11/12/24 Number of students: 140 Number of Staff: 17

Time initiated: 9:30 ☒ a.m. ☐ p.m. Time concluded 9:35 ☒ a.m. ☐ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill) Fire drill number ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 for the 2024-2025 school year

Tornado drill number ☐ 1 ☐ 2 for the 2024-2025 school year

Safety/Security drill number ☒ 1 ☐ 2 ☐ 3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 11/12/2024

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 10/15/2024 Number of students: 140 Number of Staff: 15

Time initiated: 12:00 ☐ a.m. ☒ p.m. Time concluded 12:04 ☐ a.m. ☒ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input checked="" type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill) Fire drill number ☐1 ☐2 ☒3 ☐4 ☐5 for the 2024-2025 school year
Tornado drill number ☐1 ☐2 for the 2024-2025 school year
Safety/Security drill number ☐1 ☐2 ☐3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 10/15/2024

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 10/3/2024 Number of students: 150 Number of Staff: 15

Time initiated: 9:30 ☒ a.m. ☐ p.m. Time concluded 9:33 ☒ a.m. ☐ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for: (check box next to applicable drill) Fire drill number ☐ 1 ☒ 2 ☐ 3 ☐ 4 ☐ 5 for the 2024-2025 school year

Tornado drill number ☐ 1 ☐ 2 for the 2024-2025 school year

Safety/Security drill number ☐ 1 ☐ 2 ☐ 3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 10/3/2024

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: St. Thomas the Apostle Principal: Mr. Michael Sauter

Date of drill: 9/18/2024 Number of students: 150 Number of Staff: 15

Time initiated: 9:48 ☒ a.m. ☐ p.m. Time concluded 9:52 ☒ a.m. ☐ p.m.

Situation at Start of the Drill (Check the appropriate box)			
<input type="checkbox"/> Before school	<input checked="" type="checkbox"/> During class time	<input type="checkbox"/> Passing time	<input type="checkbox"/> Recess
<input type="checkbox"/> Lunch time	<input type="checkbox"/> Assembly	<input type="checkbox"/> After school	<input type="checkbox"/> Other:

Remarks:

This report is for:
(check box next to applicable drill)

Fire drill number ☒ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 for the 2024-2025 school year

Tornado drill number ☐ 1 ☐ 2 for the 2024-2025 school year

Safety/Security drill number ☐ 1 ☐ 2 ☐ 3 for the 2024-2025 school year

Name of person conducting drill: Michael Sauter

Title of person conducting drill: Headmaster

Signature or person conducting drill: Michael Sauter Date: 9/18/2024

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

Agency: _____ Name: _____ Title: _____

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