**<company> EMERGENCY DRILL AND EVALUATION REPORT**

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| **Nature of Incident/Drill:** |
| **Facility Location:** |
| **[ ]  Scheduled Drill (complete information below)**  | **[ ]  Actual Emergency (complete information below)** |
| Date of Emergency Drill (DD/MM/YYYY)       | Date of Emergency (DD/MM/YYYY)       |
| Time:       | Time:       |
| Date of Security Notification (fire drill only)       | Date Accident Investigation Report Completed (DD/MM/YY)       |
| Date of Fire Dept. Notification (fire drill only)       |       |
| **Evacuation Response Time:**(From alarm start until roll-call completed at meeting place.) \*\*If not applicable write ‘N/A’. For example, not required if no evacuation occurred. |
| **Time: Started**       | **Time: Completed**       |
| **Notes:** *(Injuries, property damage, etc.?)* |
| **Analysis:** *(What went right? What went wrong?)* |
| **Recommended Corrective Actions:** *(What can be done to make the responses better next time?)* |
| **Executive Sign Off:** |
| **Date:** |