

Huffy and Friends

The Tulsa Firefighter's Educational Clowns

www.tfdclowns.com



Evacuation Drill

Evaluator's Check off Sheet

Drill Date: _____ Drill Start Time: _____ Drill End Time: _____

Area Evaluated: _____

Time Alarm was Activated: _____ Time Floor was Completely Cleared: _____

1. Audible alarm sounded? No Yes
2. Visible alarm was activated? No Yes
3. PA system instructions audible and understandable? No Yes
4. Stairwell Checked for smoke prior to use? No Yes
5. Did an employee(s) monitor the elevator for non-usage, and inform employees to use the stairs? No Yes
6. Were employees confused on what to do and where to go? No Yes
7. Was the floor/building searched and cleared before the wardens evacuated? No Yes
8. Were the employees that needed evacuation aid assisted? No Yes
9. Did anyone refuse to leave? No Yes
10. Was the evacuation down the stairs orderly and safe? No Yes
11. Was a count of the employees taken at the assembly area? No Yes
12. Did employees and wardens remain at the assembly area until the re-entry of the building? No Yes

Notes: (Concerns and or Compliments)

Evaluator's Name (Print) _____ (Sign) _____