

**Safety Record and Evacuation Plan for
Licensee/Program Name _____**

Year:	Monthly Fire Drill Record			Monthly Smoke & Carbon monoxide detector record (If applicable)		Quarterly Disaster Drill			
Month/Date	# of Children	Length of drill	Initials of staff present	Date smoke detector checked	Date carbon Monoxide detector checked	Type of drill conducted	# of children	Length of drill	Initials of staff present
JAN									
FEB									
MAR									
APR									
MAY									
JUNE									
JULY									
AUG									
SEP									
OCT									
NOV									
DEC									

Lockdown/Shelter in Place Annual Drill

Date of annual drill	Number of children	Length of drill	Initials of staff present

Batteries replaced (annually)		Fire Extinguisher serviced (annually)
Smoke detector (if applicable) Date:	Carbon monoxide detector (If applicable) Date:	Date:

Check daily	
<ul style="list-style-type: none"> • Evacuation plan and procedures are posted. • Exits open freely; exits are not blocked. • Electrical appliances are working properly. • Electrical outlets are not overloaded. • Extension cords are not used in place of permanent wiring. 	<ul style="list-style-type: none"> • Combustible trash is not allowed to accumulate. • Flammable or combustible material is stored safely. • Fireplaces, wood burning stoves, fireplace inserts, and heaters are used safely and out of reach of children.

Keep this form visibly posted