

After-drill report

Fill this in at the assembly point, while it is fresh. Keep it with your drill records.

Drill details

Date: _____

Alarm sounded at: _____

Last person at assembly point at: _____

Time to clear the building (minutes): _____

People expected: _____

People counted: _____

Coordinator: _____

Area covered: _____

What went well

What to fix

What needs fixing	Who will fix it	By when	Done
			☐
			☐
			☐
			☐
			☐

Quick checks (tick if yes)

☐ Alarm heard everywhere

☐ Exits and stairs were clear

☐ Nobody used the lift

☐ Doors were closed behind people

☐ Everyone who needed help got out

☐ Headcount matched the list

☐ Assembly point was easy to reach

☐ Fire engine access stayed clear

Signed off

Next drill planned for: _____

Ask your local fire station how often to drill.

Coordinator signature: _____

Date: _____

Signed off by (Office head / Facility manager): _____

Date: _____

This is a practice kit, not a legal compliance document. Follow your local fire department's advice.