

Month August

School No. 1211

FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST

Name of School: Tiger Academy
Address: 6079 Bagley

Principal: Charles McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
8.11.12	3:16pm	3:19pm				

COMMENTS:

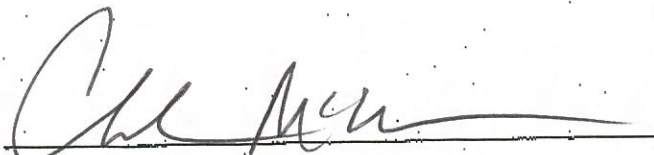
TESTED ALARM FACILITIES:

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		(X)	(X)	(X)	(X)
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		(X)	(X)	(X)	(X)
3. Check to see that no chains and padlocks are on panic hardware.		(X)	(X)	(X)	(X)
4. Report all obvious tripping hazards.		(X)	(X)	(X)	(X)
5. Report all electrical receptacles and wall switches with missing or broken face plates.		(X)	(X)	(X)	(X)
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		(X)	(X)	(X)	(X)
7. Verify that all solid waste containers are kept closed at all times except when being used.		(X)	(X)	(X)	(X)
8. Verify that all drinking fountains are cleaned daily.		(X)	(X)	(X)	(X)
9. Report inoperative fly fans.		()	()	()	()
10. Verify that playground equipment is in safe condition.		(X)	(X)	(X)	(X)
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		(X)	(X)	(X)	(X)
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		(X)	(X)	(X)	(X)

Remarks:


PRINCIPAL'S SIGNATURE


INSPECTOR'S SIGNATURE

Month September

School No. 1211

**FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST**

Name of School: Tiger Academy
Address: 1079 Bagley Rd

Principal: Charles McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
<u>9/25/12</u>	<u>2:51 pm</u>	<u>2:54 pm</u>				

COMMENTS: _____

TESTED ALARM FACILITIES: _____

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3. Check to see that no chains and padlocks are on panic hardware.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4. Report all obvious tripping hazards.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5. Report all electrical receptacles and wall switches with missing or broken face plates.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
7. Verify that all solid waste containers are kept closed at all times except when being used.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
8. Verify that all drinking fountains are cleaned daily.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
9. Report inoperative fly fans.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
10. Verify that playground equipment is in safe condition.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Remarks: _____

PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE

3min 17.50 seconds

Month Oct 2012

School No. 121

**FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST**

Name of School: Tiger Academy
Address: Wong Bagley

Principal: Charles McWhite
Telephone: 309-0840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
<u>10.23.12</u>	<u>2:02pm</u>		<u>PM</u>			

COMMENTS: 3:21.7

TESTED ALARM FACILITIES:

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3. Check to see that no chains and padlocks are on panic hardware.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4. Report all obvious tripping hazards.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5. Report all electrical receptacles and wall switches with missing or broken face plates.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
7. Verify that all solid waste containers are kept closed at all times except when being used.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
8. Verify that all drinking fountains are cleaned daily.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
9. Report inoperative fly fans.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
10. Verify that playground equipment is in safe condition.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Remarks: _____

PRINCIPAL'S SIGNATURE


INSPECTOR'S SIGNATURE

Month

November
~~December~~

School No. 1211

FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLISTName of School: Tiger Academy
Address: 10079 Bagley Rd.Principal: Charles McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
11/29/12	10:47am	10:50am	AM		63°	

COMMENTS: 03:38. 2 time

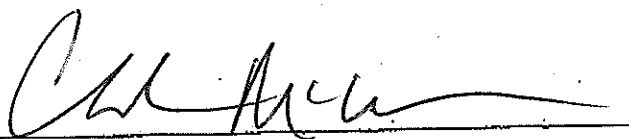
TESTED ALARM FACILITIES:

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		(X)	(X)	()	(X)
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		(X)	(X)	(X)	(X)
3. Check to see that no chains and padlocks are on panic hardware.		(X)	(X)	(X)	(X)
4. Report all obvious tripping hazards.		(X)	(X)	(X)	(X)
5. Report all electrical receptacles and wall switches with missing or broken face plates.		(X)	(X)	(X)	(X)
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		(X)	(X)	(X)	(X)
7. Verify that all solid waste containers are kept closed at all times except when being used.		(X)	(X)	(X)	(X)
8. Verify that all drinking fountains are cleaned daily.		(X)	(X)	(X)	(X)
9. Report inoperative fly fans.		()	()	()	()
10. Verify that playground equipment is in safe condition.		(X)	(X)	(X)	(X)
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		(X)	(X)	(X)	(X)
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		(X)	(X)	(X)	(X)

Remarks: _____



PRINCIPAL'S SIGNATURE



INSPECTOR'S SIGNATURE

Month DecemberSchool No. 1211FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLISTName of School: Tiger Academy
Address: 6079 Bagley Rd.Principal: Charles McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
<u>12/28/12</u>	<u>10:30am</u>	<u>10:38am</u>	<u>AM</u>		<u>46°F</u>	

COMMENTS: _____

TESTED ALARM FACILITIES: _____

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		()	()	()	()
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		()	()	()	()
3. Check to see that no chains and padlocks are on panic hardware.		()	()	()	()
4. Report all obvious tripping hazards.		()	()	()	()
5. Report all electrical receptacles and wall switches with missing or broken face plates.		()	()	()	()
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		()	()	()	()
7. Verify that all solid waste containers are kept closed at all times except when being used.		()	()	()	()
8. Verify that all drinking fountains are cleaned daily.		()	()	()	()
9. Report inoperative fly fans.		()	()	()	()
10. Verify that playground equipment is in safe condition.		()	()	()	()
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		()	()	()	()
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		()	()	()	()

Remarks: _____

PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE

Month January

School No. 1211

FIRE EXIT, EMERGENCY EVACUATION DRILLS AND SAFETY - TO - LIFE CHECKLIST

Name of School: Tiger Academy
Address: 16079 Bagley Rd.

Principal: Charles McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
<u>1/30/13</u>	<u>8:17am</u>	<u>8:20am</u>	<u>AM</u>			

COMMENTS: _____

TESTED ALARM FACILITIES: _____ DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		(✓)	(✓)	(✓)	()
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		(✓)	(✓)	(✓)	(✓)
3. Check to see that no chains and padlocks are on panic hardware.		(✓)	(✓)	(✓)	(✓)
4. Report all obvious tripping hazards.		(✓)	(✓)	(✓)	(✓)
5. Report all electrical receptacles and wall switches with missing or broken face plates.		(✓)	(✓)	(✓)	(✓)
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		(✓)	(✓)	(✓)	(✓)
7. Verify that all solid waste containers are kept closed at all times except when being used.		(✓)	(✓)	(✓)	(✓)
8. Verify that all drinking fountains are cleaned daily.		(✓)	(✓)	(✓)	(✓)
9. Report inoperative fly fans.		(✓)	(✓)	(✓)	(✓)
10. Verify that playground equipment is in safe condition.		(✓)	(✓)	(✓)	(✓)
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		(✓)	(✓)	(✓)	(✓)
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		(✓)	(✓)	(✓)	(✓)

Remarks: _____

PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE

MR. Cummings

Month February

School No. 1211

FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST

Name of School: Tiger Academy
Address: 6079 Bagley Rd.

Principal: Charles McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
2/21/13	9:01am	9:04am	AM			

COMMENTS:

TESTED ALARM FACILITIES:

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		(✓)	(✓)	(✓)	(✓)
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		(✓)	(✓)	(✓)	(✓)
3. Check to see that no chains and padlocks are on panic hardware.		(✓)	(✓)	(✓)	(✓)
4. Report all obvious tripping hazards.		(✓)	(✓)	(✓)	(✓)
5. Report all electrical receptacles and wall switches with missing or broken face plates.		(✓)	(✓)	(✓)	(✓)
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		(✓)	(✓)	(✓)	(✓)
7. Verify that all solid waste containers are kept closed at all times except when being used.		(✓)	(✓)	(✓)	(✓)
8. Verify that all drinking fountains are cleaned daily.		(✓)	(✓)	(✓)	(✓)
9. Report inoperative fly fans.		(✓)	(✓)	(✓)	(✓)
10. Verify that playground equipment is in safe condition.		(✓)	(✓)	(✓)	(✓)
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		(✓)	(✓)	(✓)	(✓)
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		(✓)	(✓)	(✓)	(✓)

Remarks:

PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE

MR. Cummings

Month March

School No. 121

FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST

Name of School: Tiger Academy
Address: 12079 Bagley Rd

Principal: Charles McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
3/27/13	10:31am	10:34am	AM		41°F	

COMMENTS:

TESTED ALARM FACILITIES:

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		(✓)	(✓)	(✓)	(✓)
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		(✓)	(✓)	(✓)	(✓)
3. Check to see that no chains and padlocks are on panic hardware.		(✓)	(✓)	(✓)	(✓)
4. Report all obvious tripping hazards.		(✓)	(✓)	(✓)	(✓)
5. Report all electrical receptacles and wall switches with missing or broken face plates.		(✓)	(✓)	(✓)	(✓)
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		(✓)	(✓)	(✓)	(✓)
7. Verify that all solid waste containers are kept closed at all times except when being used.		(✓)	(✓)	(✓)	(✓)
8. Verify that all drinking fountains are cleaned daily.		(✓)	(✓)	(✓)	(✓)
9. Report inoperative fly fans.		()	()	()	()
10. Verify that playground equipment is in safe condition.		(✓)	(✓)	(✓)	(✓)
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		(✓)	(✓)	(✓)	(✓)
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		(✓)	(✓)	(✓)	(✓)

Remarks:

PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE

Month April

School No. 1211

**FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST**

Name of School: Tiger Academy
Address: 12079 Bagley Rd

Principal: Mr. McWhite
Telephone: 309-6840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
<u>4/29/13</u>	<u>8:58am</u>	<u>9:03am</u>	<u>AM</u>			

COMMENTS: _____

TESTED ALARM FACILITIES: _____ DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		()	()	()	()
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		()	()	()	()
3. Check to see that no chains and padlocks are on panic hardware.		()	()	()	()
4. Report all obvious tripping hazards.		()	()	()	()
5. Report all electrical receptacles and wall switches with missing or broken face plates.		()	()	()	()
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		()	()	()	()
7. Verify that all solid waste containers are kept closed at all times except when being used.		()	()	()	()
8. Verify that all drinking fountains are cleaned daily.		()	()	()	()
9. Report inoperative fly fans.		()	()	()	()
10. Verify that playground equipment is in safe condition.		()	()	()	()
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		()	()	()	()
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		()	()	()	()

Remarks: _____

PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE

Month May

School No. 1211

**FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST**

Name of School: Tiger Academy
Address: 10079 Bagley Rd

Principal: Charles McWhite
Telephone: 309-10840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
<u>5/31/13</u>	<u>2:05pm</u>	<u>2:09pm</u>				

COMMENTS:

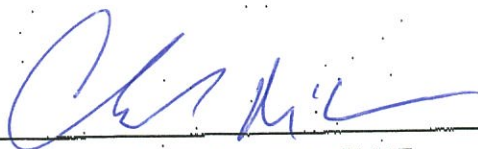
TESTED ALARM FACILITIES:

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		(✓)	(✓)	(✓)	(✓)
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		(✓)	(✓)	(✓)	(✓)
3. Check to see that no chains and padlocks are on panic hardware.		(✓)	(✓)	(✓)	(✓)
4. Report all obvious tripping hazards.		(✓)	(✓)	(✓)	(✓)
5. Report all electrical receptacles and wall switches with missing or broken face plates.		(✓)	(✓)	(✓)	(✓)
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		(✓)	(✓)	(✓)	(✓)
7. Verify that all solid waste containers are kept closed at all times except when being used.		(✓)	(✓)	(✓)	(✓)
8. Verify that all drinking fountains are cleaned daily.		(✓)	(✓)	(✓)	(✓)
9. Report inoperative fly fans.		(✓)	(✓)	(✓)	(✓)
10. Verify that playground equipment is in safe condition.		(✓)	(✓)	(✓)	(✓)
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		(✓)	(✓)	(✓)	(✓)
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		(✓)	(✓)	(✓)	(✓)

Remarks:



PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE

Month June

School No. 121

**FIRE EXIT, EMERGENCY EVACUATION DRILLS AND
SAFETY - TO - LIFE CHECKLIST**

Name of School: Tiger Academy
Address: 10079 Bagley Rd

Principal: Charles McWhite
Telephone: 309-0840

DATE	TIME DRILL STARTED	TIME DRILL OVER	TIME OF DRILL	ENROLLMENT THIS DATE	WEATHER CONDITION	EVACUATION PLAN USED
<u>6/30/13</u>	<u>4:31pm</u>	<u>4:35pm</u>	<u>PM</u>		<u>Rainy</u>	

COMMENTS: _____

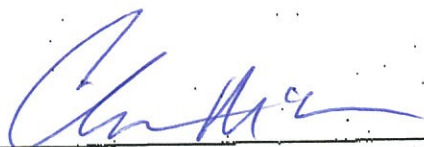
TESTED ALARM FACILITIES: _____

DATE _____ HOUR _____

Check the following Safety - To - Life WEEKLY. Retain one copy and send one copy to the Director of safety MONTHLY.

	WEEK	1	2	3	4
1. All exit lights operative.		(✓)	(✓)	(✓)	(✓)
2. Check to see that all fire extinguishers are filled and have been recharged within the last year.		(✓)	(✓)	(✓)	(✓)
3. Check to see that no chains and padlocks are on panic hardware.		(✓)	(✓)	(✓)	(✓)
4. Report all obvious tripping hazards.		(✓)	(✓)	(✓)	(✓)
5. Report all electrical receptacles and wall switches with missing or broken face plates.		(✓)	(✓)	(✓)	(✓)
6. Check to see that all soap dispensers are filled and / or that bar soap and paper towels are provided for each restroom.		(✓)	(✓)	(✓)	(✓)
7. Verify that all solid waste containers are kept closed at all times except when being used.		(✓)	(✓)	(✓)	(✓)
8. Verify that all drinking fountains are cleaned daily.		(✓)	(✓)	(✓)	(✓)
9. Report inoperative fly fans.		(✓)	(✓)	(✓)	(✓)
10. Verify that playground equipment is in safe condition.		(✓)	(✓)	(✓)	(✓)
11. Check fire alarm system to ascertain that it has not been placed in an inoperative condition by unauthorized personnel.		(✓)	(✓)	(✓)	(✓)
12. Verify that flammable materials are stored correctly - State Board Education Regulation 6A - 2.78.		(✓)	(✓)	(✓)	(✓)

Remarks: _____



PRINCIPAL'S SIGNATURE

INSPECTOR'S SIGNATURE