

FIRE SAFETY PRACTICES

LOCATION OF FIRE EXTINGUISHERS

SEVERE WEATHER DRILLS (Every 3 Mos.)

Date: _____ Date: _____

Time: _____ Time: _____

Exit Time: _____ Exit Time: _____

Staff Initial: _____ Staff Initial: _____

**RELOCATION SITE FOR CHILDREN AND STAFF
AFTER EVACUATING OPERATION:**

Date: _____ Date: _____

Time: _____ Time: _____

Exit Time: _____ Exit Time: _____

Staff Initial: _____ Staff Initial: _____

MONTHLY FIRE EXTINGUISHER CHECKS				FIRE DRILLS			Smoke Alarm Detector Test	CO etector Test
Month	Date	Staff Initial	Person In Charge	Date & Time	Exit Time	Staff Initial	Date	Date
January								
February								
March								
April								
May								
June								
July								
August								
September								
October								
November								
December								

FIRST AID KIT LOCATION(S) _____

BATTERY POWERED LIGHTING IS LOCATED IN EACH CHILD CARE ROOM - CHECK BATTERIES

OPERATION INSPECTIONS: FIRE: _____ HEALTH: _____ GAS: _____