



**Office of the State Fire Marshal
Division of Fire Prevention
School Fire Report Form**

School Safety Drill Act (105 ILCS 128/35)

Name and Address of School: (please print except when signing the signature line.)

Date of Incident: _____ **Time of Incident:** _____ **Was Fire Dept. notified?** _____

Specific Location of Incident:

Briefly Describe What Happened:

Name: _____ **Title:** _____

Date: _____ **Signature:** _____