

Shopping Mall Evacuation Drill Record Sheet

Mall Name

Drill Date

Drill Time

Coordinator/Facilitator Name

Location / Area

Participants

No.	Name	Department / Store	Role	Signature

Drill Details

Type of Drill

Evacuation Start Time

Total Evacuation Time

Number of Evacuees

Assembly Point(s)

Observations / Issues Noted

Corrective Actions / Recommendations

Remarks