



# Emergency Evacuation Rehearsal Record

## Quality Area 2: Children’s health and safety

- 2.1 Health: Each child's health and physical activity is supported and promoted
- 2.2 Safety: Each child is protected

Date:	___ / ___ / 20___ Day: _____	
Number of children:	_____ (Use a copy of the sign in sheets to show participating children)	
Participating staff and volunteers:		
Procedure:		
Time started:	_____ Am / Pm	
Time ended:	_____ Am / Pm	Time taken: _____ min
Assembly area:		
Evaluation:		

Tick if the 'day roll' is attached      Nominated Responsible Person: \_\_\_\_\_