



DUCK, COVER AND HOLD DRILL REPORTING FORM

COUNTY:

AGENCY:

ADDRESS:

Please answer all applicable questions.

1. How did you first receive notification that the Earthquake Drill was underway?
What other notifications did you receive, in addition to the first one?
2. Who initiated the notification you received?
3. What percentage of county schools participated?
4. What activities took place in your county related to Earthquake Preparedness?
5. What suggestions or comments do you have to make future campaigns more effective?

PERSON MAKING REPORT:

DATE:

Please return completed form to either your local Emergency Management Director or to the following address:

Earthquake Program
Kentucky Division of Emergency Management
Boone Center
Frankfort, KY 40601