

**University of Louisiana at Monroe  
Environmental Health and Safety Department**

Date:

Stop Time:

Total Time  
Taken:

	<b>Item</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>Comments</b>
1	Was the evacuation of the building conducted in a safe, orderly manner?				
2	Did building occupants use the closest exits?				
3	Did anyone enter the building during the evacuation?				
4	Did everyone in the building evacuate?				
5	Were fire alarms audible throughout the building?				
6	Were interior doors closed properly?				
7	Were handicapped occupants evacuated safely?				
8	Were elevators used?				
9	Did everyone assemble in the proper locations?				

<b>#</b>	<b>Item</b>
----------	-------------

Person Completing this Report (print name):

Person Completing this Report (signature):