

## APPENDIX 17: SCHOOL SURVEY

To be completed by individuals involved in the sale of food and beverages in the school.

Name: \_\_\_\_\_ Current Position: \_\_\_\_\_

### 1. Are you aware of the requirements of the School Food and Beverage Policy?

Yes  No

If No, please visit [www.ontario.ca/healthyschools](http://www.ontario.ca/healthyschools) before completing the rest of the survey.

### 2. Identify the venue, program, and/or event in the school where you are involved in the sale of food and beverages (check all that apply):

#### Venues

Cafeteria

Canteen

Tuck Shop

Vending Machine

Other \_\_\_\_\_

#### Programs

Catered Lunch Program

Lunch Days

Curriculum Program

(e.g., Hospitality and Tourism)

Milk Program

Other \_\_\_\_\_

#### Events

Winter Carnival

Fun Fair

Family Dinner Night

Meet the Teacher Night

Bake Sale/Popcorn Sale

Graduation

Performances

Sporting Events

Other \_\_\_\_\_

### 3. Outline any questions you have about the implementation of the School Food and Beverage Policy.

### 4. Identify any additional resources you need to fully implement the School Food and Beverage Policy.

### 5. Would you be interested in joining the school's implementation committee?

Yes  No