

HEALTHY SCHOOLS RECOGNITION PROGRAM ACCEPTANCE FORM

PART A: SCHOOL INFORMATION

SCHOOL NAME	SCHOOL BOARD/AUTHORITY NAME	SCHOOL TYPE
ADDRESS	CITY	POSTAL CODE
PRINCIPAL'S EMAIL ADDRESS	TELEPHONE NUMBER	FAX
NAME OF CONTACT (if different from the principal)	CONTACT'S EMAIL ADDRESS	WAS YOUR SCHOOL RECOGNIZED LAST YEAR?

PART B: THE PLEDGE

Complete the following statement by pledging to undertake one or more healthy schools initiatives. This information will be included on your school's certificate. (90 characters maximum) We pledge to become a healthier school by...

PART C: HEALTHY SCHOOLS ACTIVITY

Using the Foundations for a Healthy School framework as your guide, identify the health-related topic and component for each activity listed. Provide a brief description for each activity outlining what you will undertake and how you will accomplish the objective of becoming a healthier school in the 2009/10 school year.

Activity #1 - Title	Description (350 character maximum)
Health-Related Topic Choose one from the list	
Component Choose one from the list	

Optional: If you are undertaking more than one new Healthy Schools activity this year please list below.

Activity #2 - Title	Description (350 character maximum)
Health-Related Topic Choose one from the list	
Component Choose one from the list	

Activity #3 - Title	Description (350 character maximum)
Health-Related Topic Choose one from the list	
Component Choose one from the list	

PART D: ACCEPTANCE

Our school agrees to work towards the objective of becoming a healthier school in the 2009/10 school year.

SCHOOL PRINCIPAL - PRINTED NAME

SIGNATURE: _____

SCHOOL COUNCIL CHAIR - PRINTED NAME

SIGNATURE: _____

STUDENT REPRESENTATIVE - PRINTED NAME

SIGNATURE: _____

Send the completed Acceptance Forms to your school board, care of the Director of Education.

FOR SCHOOL BOARD USE ONLY

AUTHORIZED SCHOOL BOARD OFFICER'S PRINTED NAME

SIGNATURE: _____