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 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 __________________