Form Approved

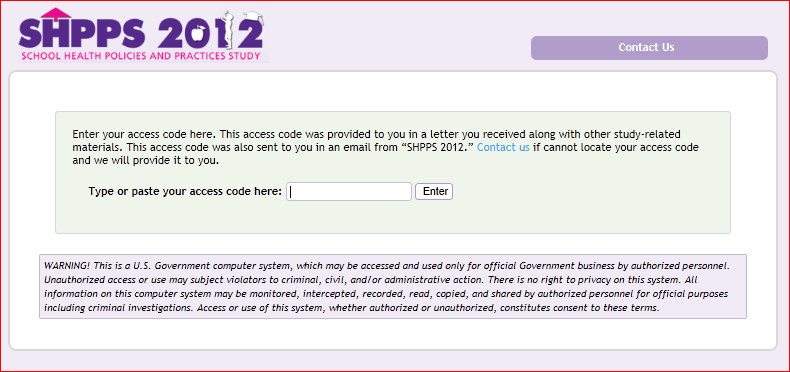
OMB No: 0920-0445

Expiration Date: xx/xx/xxxx

**Screen Shots**

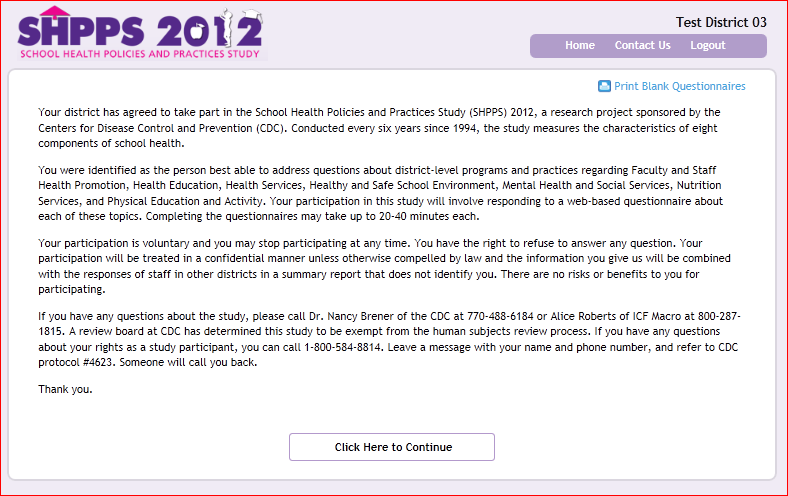
**Appendix G-17**

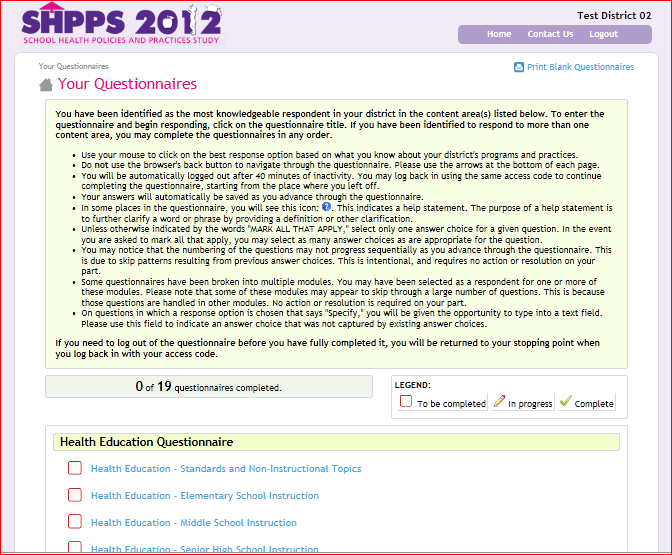
**Login Screen**



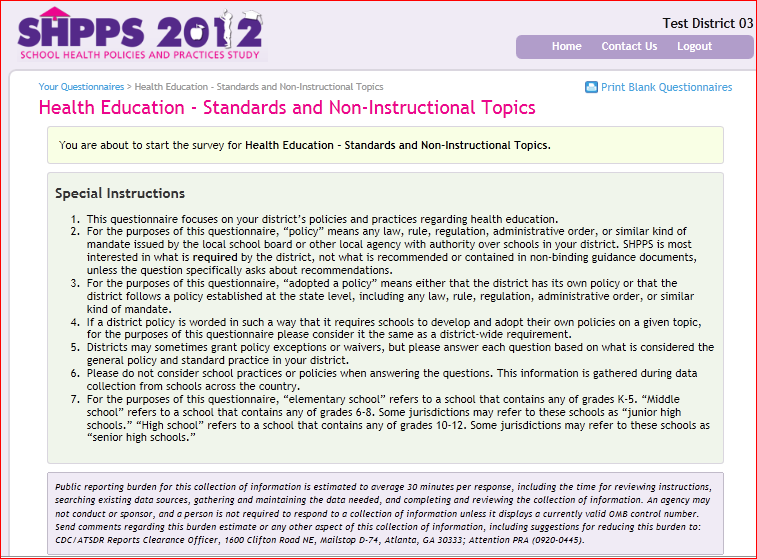
District Confirmation Screen

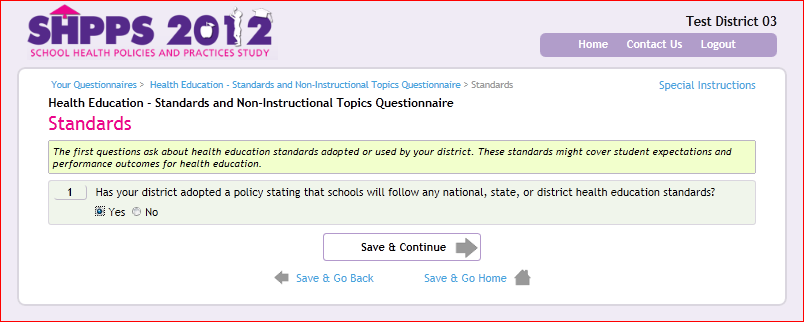


Consent Statement

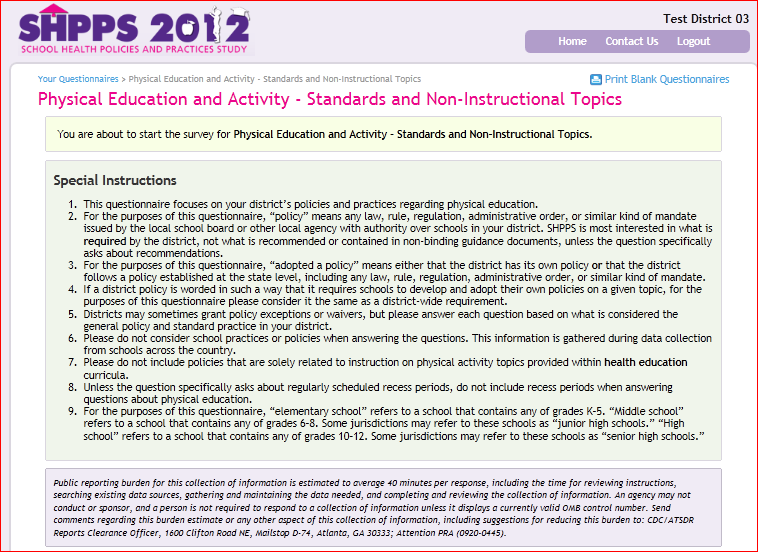
Questionnaires Menu / Home Page

Health Education – Special Instructions

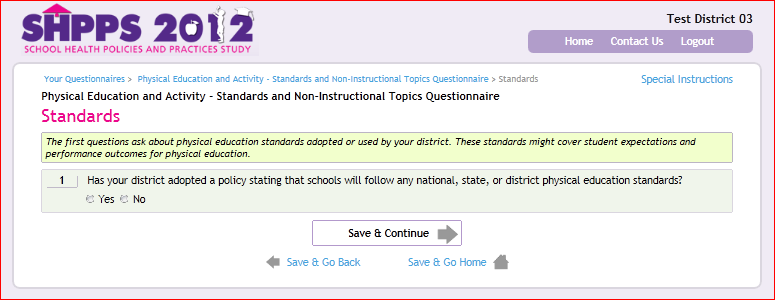
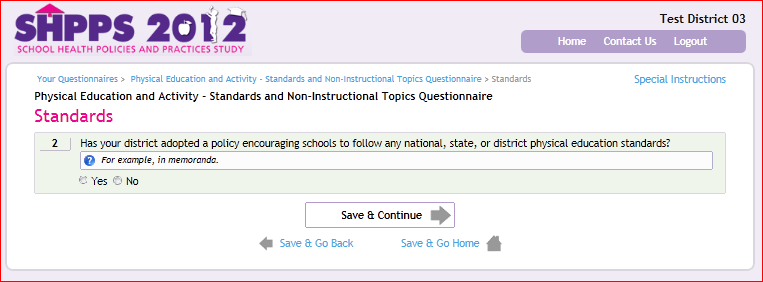


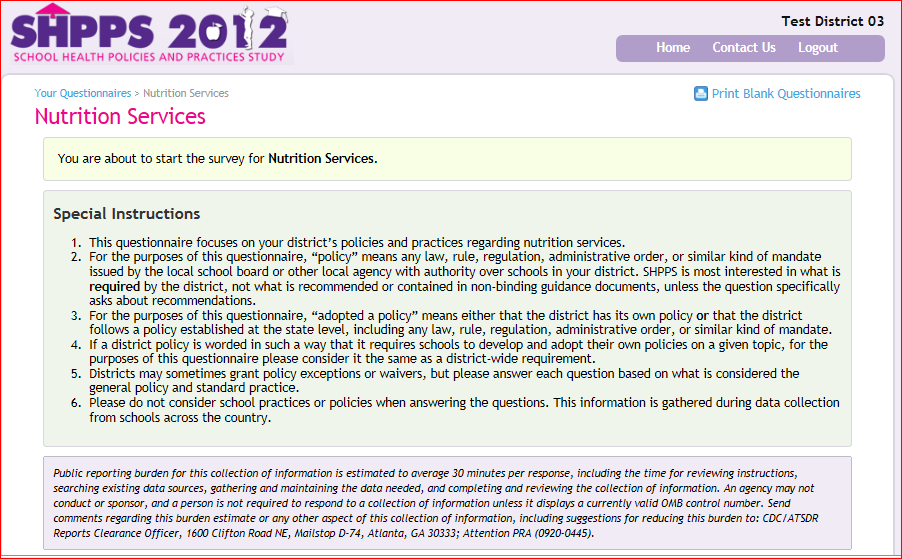
Health Education –Questions

**Physical Education – Special Instructions**

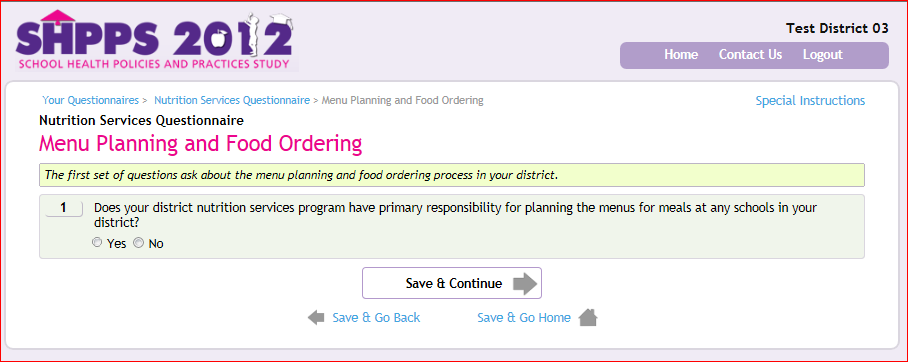
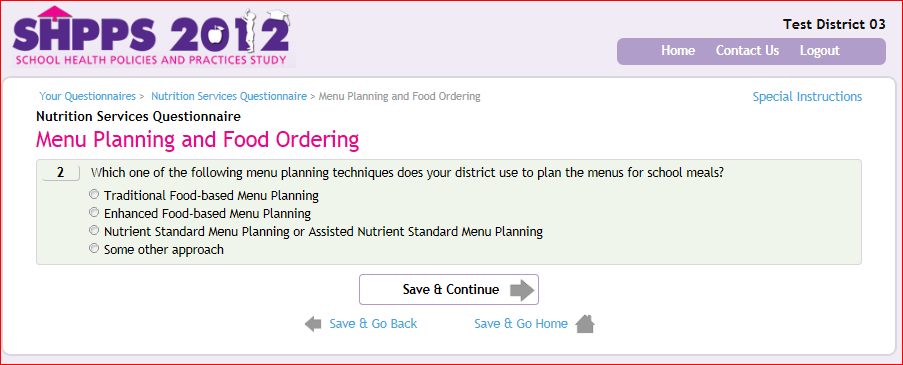


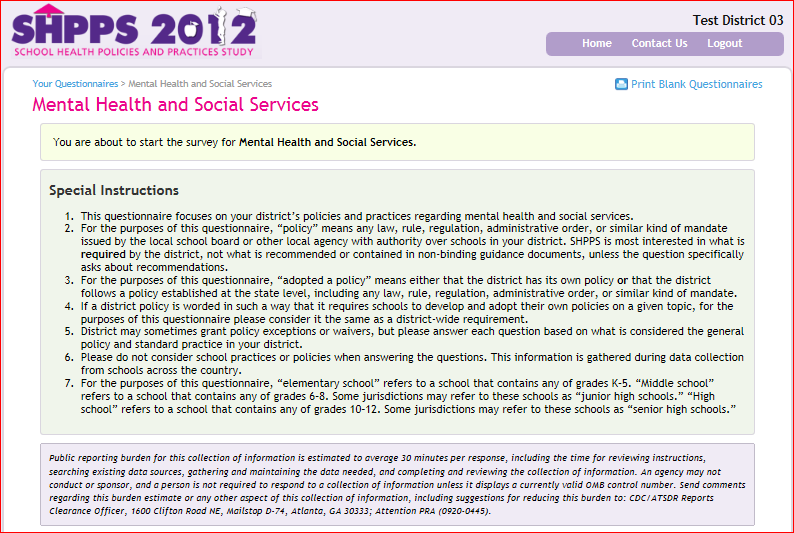
**Physical Education –Questions**



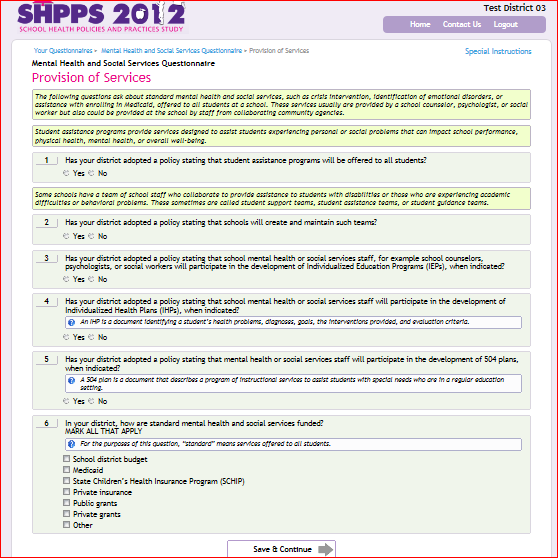
Nutrition Services – Special Instructions

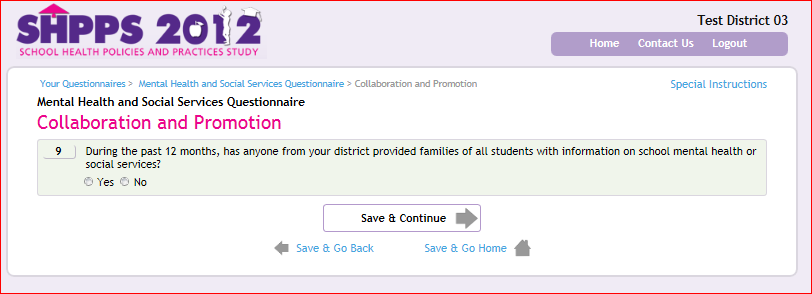
Nutrition Services –Questions



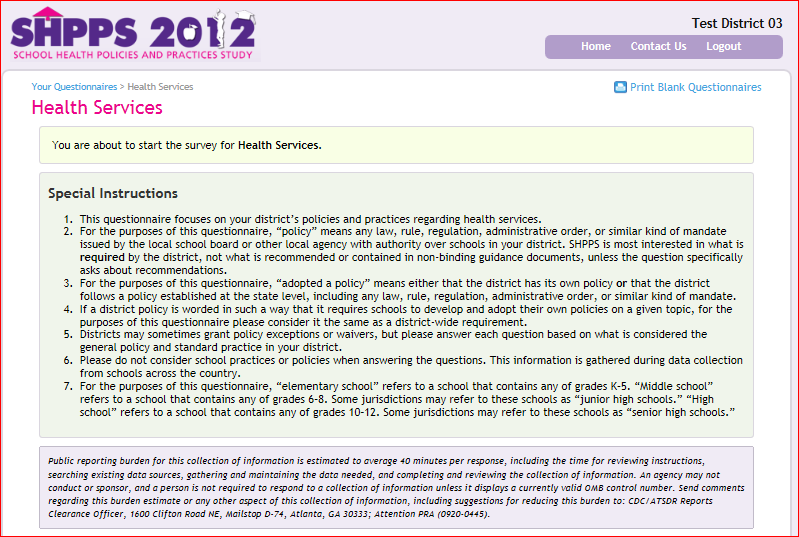
**Mental Health and Social Services – Special Instructions**

**Mental Health and Social Services –Questions**

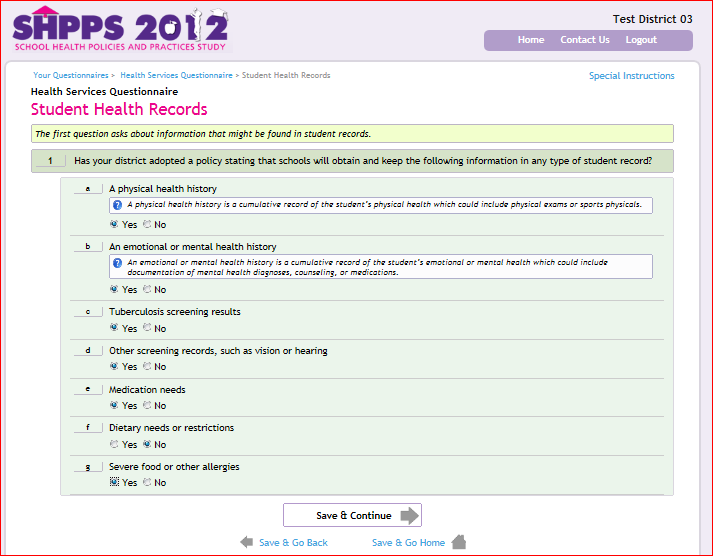




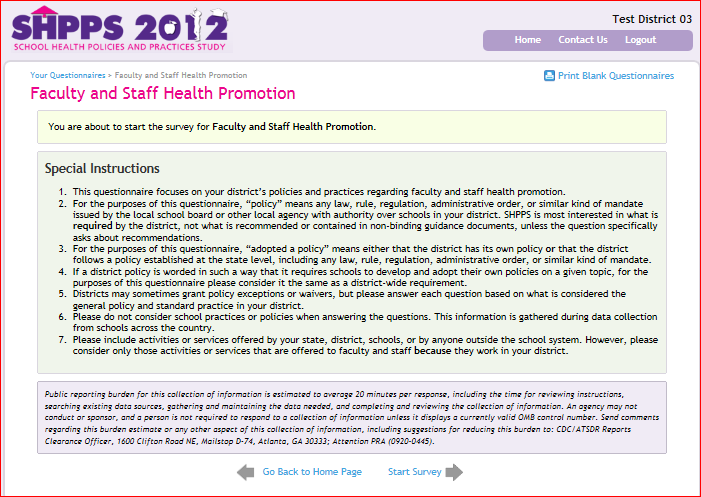
**Health Services – Special Instructions**



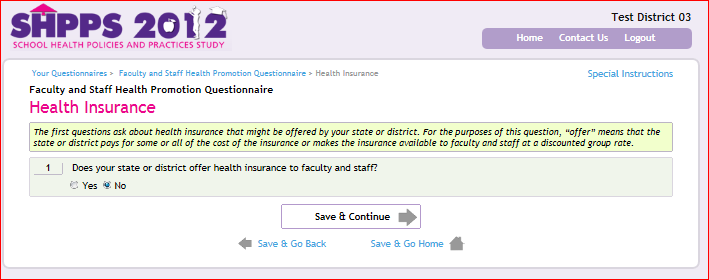
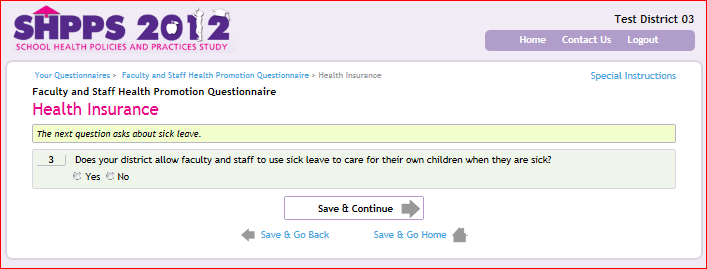
**Health Services –Questions**



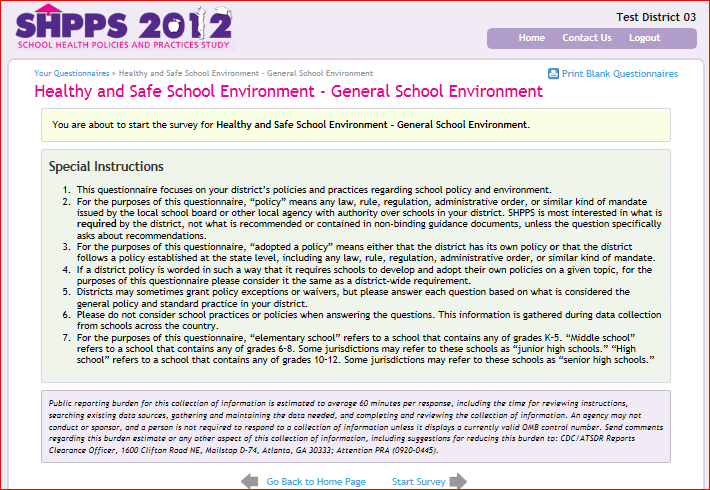


**Faculty and Staff Health Promotion – Special Instructions**

**Faculty and Staff Health Promotion –Questions**



Healthy and Safe School Environment – Special Instructions



Healthy and Safe School Environment –Questions

