APPENDIX o

Student Height and Weight Measurement Form

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**OMB Clearance Number:** 0584-XXXX

**Expiration Date:** XX/XX/XXXX

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| Weight and Standing Height Measurement Form |

|  |  |
| --- | --- |
| ID Label | Interviewer MPR ID #: | | | | | | | | || | | / | | | / 2015 Month Day |
| 1. ASK STUDENTS TO REMOVE SHOES, HATS, EXTRA CLOTHES |
| 2. **Weight** |
| 2a. 1st measurement |  |  |  | **.** |  | Pounds**IF DIFFERENCE BETWEEN 1ST & 2ND MEASUREMENT IS GREATER THAN 1 POUND, TAKE 3RD MEASUREMENT.** |
| 2b. 2nd measurement |  |  |  | **.** |  | Pounds |
| 2c. 3rd measurement |  |  |  | **.** |  | Pounds |

3. Concerns about weight measurement:

 **MARK ALL THAT APPLY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0 | □ | No concerns | 5 | □ | Difficulty obtaining measurement |
| 1 | □ | Wearing heavy clothing, brace, or cast | 6 | □ | Child or parent report *[Describe reason in Comments]* |
| 2 | □ | Wearing shoes | 7 | □ | Refusal (no measurement or report) |
| 3 | □ | Weight exceeded scale limit | 8 | □ | Other *(Specify)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 4 | □ | Pregnant |  |  |  |
| 4. **Standing Height** |
| 4a. 1st measurement |  |  | **.** |  |  | Inches**IF DIFFERENCE BETWEEN 1ST & 2ND MEASUREMENT IS GREATER THAN 1 INCH, TAKE 3RD MEASUREMENT.** |
| 4b. 2nd measurement |  |  | **.** |  |  | Inches |
| 4c. 3rd measurement |  |  | **.** |  |  | Inches |

5. Concerns about height measurement:

 **MARK ALL THAT APPLY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  0 | □ | No concerns | 3 | □ | Difficulty obtaining measurement |
| 1 | □ | Wearing shoes or boots | 4 | □ | Child or parent report *[Describe reason in Comments*] |
| 2 | □ | Hair, hair piece, or hat interfered | 5 | □ | Refusal (no measurement or report) |
|  |  |  | 6 | □ | Other *(Specify)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |

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