



OMB Control Number: 0584-XXXX Expiration Date: XX/XX/XXXX



School Nutrition and Meal Cost Study-II Principal Survey

Sponsored by:

U.S. Department of Agriculture Food and Nutrition Service

Load Variable	Variable Name	Description	Values
SCHOOL LEVEL	SCHOOL CCD	Elementary, Middle, High	E, M, H
SCHOOL NAME			
ENROLLMENT			

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. All information will be kept private under the Privacy Act to the extent allowed by law. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302, ATTN: PRA







PR	\sim	'D'	\	IN A		
PK	()(-	1K /	ΑIVI	IIVI	-	к

ENTRY CONDITIONS ARE BASED ON WHETHER SCHOOL LEVEL IS ELEMENTARY, MIDDLE, OR HIGH SCHOOL. THE SAMPLE LOAD FILE WILL INCLUDE THE VARIABLE LEVELCCD WITH VALUES OF E, M, AND H.

LOGIN SCREEN	
Welcome to the School Nutrition	and Meal Cost Study-II Principal Survey!
Username:	
	Password:

- To access the survey, please enter your user name and password in the boxes above.
- If you have any questions about the study or about completing this survey, please contact the study team by email at xxx@xxx.com or by phone at xxx-xxx-xxxx (toll-free).

INSTRUCTIONS SCREEN

Instructions

- Under the Richard B. Russell National School Lunch Act, cooperation with this study is required. We thank you for your cooperation and participation in this very important study.
- The information you provide will be used only for statistical purposes. Your responses will not be disclosed in identifiable form without your consent.
- Please answer all of the questions.
- You may complete the survey all at once or save your responses and return at a later time.
- Please use the buttons and links on each page to move through the survey. Using "Enter" or your browser's "Back" function may cause errors.
- If you are returning to finish your saved survey, you will return to the point where you left off.
- This survey is intended for the school principal but can be completed by any staff member who is very familiar with the school's policies related to food service and nutrition education.

If you have any questions about the study or about completing this survey, please contact the study team by email at xxx@xxx.com or by phone at xxx-xxx-xxxx (toll-free).

DDING	PAL SURVEY	
PRINCI	PAL SURVET	
VERIFI	ICATION SCREEN	
ALL		
A.	We will be asking you qu please call XXX-XXX-XXX	estions about [FILL SCHOOL NAME]. If this is not the name of your school, X.
ALL		
В.	Please enter your name, questions about the surv	phone number, and email address so we can contact you if we have any ey.
	First Name (STRING 20)	Last Name (STRING 20)
	Phone Number Email Address	(Phone number format: (XXX) XXX-XXXX)

SOFT CHECK: IF B=NO RESPONSE: Your response to this question is important. Please provide a response and continue.

STRING 40)

SCHOOL CHARACTERISTICS AND SCHOOL MEAL POLICIES

ALL					
1. What grades are included in your school?					
PROGRAMMER: DROP-DOWN 1 RANGE: PRE-K TO 12; DROP-DOWN 2 RANGE: K TO 12					
to					
SOFT CHECK: IF Q1=NO RESPONSE: Your response to this question is important. Please provide a response and continue.					
SOFT CHECK: IF DROP-DOWN 2 < DROP-DOWN 1: The second grade selection should be greater than or equal to the first grade selection. Please correct your response and continue.					
IF anyallment data available in comple lead					
IF enrollment data available in sample load					
FILL school name and enrollment from pre-load					
1a. Our records show that the total enrollment of [NAME OF SCHOOL] is [ENROLLMENT]. Is that right? 1 O Yes 0 No					
IF enrollment data unavailable in sample load OR 1a = 0					
FILL school from pre-load					
1b. What is the total enrollment at [NAME OF SCHOOL]?					
TOTAL STUDENT ENROLLMENT					
(RANGE 1-9,999)					
SOFT CHECK: IF Q1b >1,000: You entered that total enrollment at [NAME OF SCHOOL] is [FILL]. Please confirm or correct your response to continue.					
ALL					
2. What is the average daily attendance at your school?					
Please enter the number of students OR percent of students enrolled.					
PROGRAMER: MAKE RESPONSE OPTIONS EXCLUSIVE SO RESPONDENTS CANNOT ENTER BOTH A NUMBER AND A PERCENTAGE.					
STUDENTS OR					
I I I PERCENT					
SOFT CHECK: IF Q2 NUMBER OF STUDENTS>ENROLLMENT FROM 1A OR 1B: Please enter a number of students less than the [FILL ENROLLMENT FROM 1A OR 1B] enrolled in your school.					

ALL	
3.	Does your school participate in the School Breakfast Program (SBP)? 1 O Yes 0 No
	D CHECK: IF Q3=NO RESPONSE: Your response to this question is important. Please provide a onse to continue.
ALL	
4.	Are the school lunch or school breakfast programs unavailable to any students at your school, for example part-day kindergarteners or students who actually attend school in a different location during the meal periods? 1 O Yes 0 No
	T CHECK: IF Q4=NO RESPONSE: Your response to this question is important. Please provide a onse and continue.
Q4=1	
4a.	For how many students is lunch unavailable?
	_ _ STUDENTS FOR WHOM LUNCH IS UNAVAILABLE (RANGE: 0-5,000)
	T CHECK: IF Q4a > ENROLLMENT FROM 1A OR 1B: Please enter a number of students less than the ENROLLMENT FROM 1A OR 1B] enrolled in your school.
Q3=1	AND Q4=1
4b.	For how many students is breakfast unavailable?
	_ _ STUDENTS FOR WHOM BREAKFAST IS UNAVAILABLE (RANGE: 0-5,000)
	T CHECK: IF Q4a > ENROLLMENT FROM 1A OR 1B: Please enter a number of students less than the ENROLLMENT FROM 1A OR 1B] enrolled in your school.
ALL	
5.	Are all students required to go to the cafeteria or food service area (indoor or outdoor) for at least part of their lunch period? 1 O Yes 0 O No

PRINCIP	AL SURVI	EY
Q5=0		
5a.		Where may students go during their lunch period?
	SELEC	CT ALL THAT APPLY
	1 🗆	Food service area/cafeteria or other area where meals are served
	2 🗌	Classroom but only with teacher permission
	3 🗌	Classrooms open to students during lunch period
	4	Library
	5	Gym
	6	Computer lab or media center
	7	Outside, on campus
	8 🗌	Other designated area on campus, such as hallways, student commons
	9 🗌	Anywhere on campus
	10	Off-campus/home
	11 🔲	Other (specify)
		(STRING 255)
Q5A=	10	
5b.	Which	of the following off-campus food sources are close enough for students to go to during lunch?
	SELEC	CT ALL THAT APPLY
	1	Fast food restaurants
	2 🗌	Other restaurants, cafeterias, or diners
	3 🗌	Supermarkets, convenience stores, or other stores
	₄ \square	Off-campus lunch wagons, food trucks, or push carts not operated by the school meals program

 $_{\rm 5}$ $\;\;\square$ $\;$ Home or home of relative or friend

 $_{6}$ \square Other food sources (specify)

(STRING 255)

ALL						
6.	Does your school have rules or written policies about when students may buy a la carte foods, that is, foods other than a reimbursable meal or milk?					
	1 O Yes, for all students					
	₂ O Yes, for some students					
	3 O No rules; students may buy a la carte foods under any circumstances					
	School does not have a la carte foods					
Q6=1	1 OR 2					
6a.	What are those rules? A la carte foods may be purchased					
	SELECT ALL THAT APPLY					
	$_{\scriptscriptstyle 1}$ $\;\square\;$ When a student takes a reimbursable meal					
	$_2$ \square When a student brings lunch from home					
	\Box After a student has eaten their meal (whether reimbursable or brought from home)					
	$_4$ \square When all students have had the opportunity to take a reimbursable meal					
	6 U When students have a positive account balance					
	7 Uhen students have parent permission					
	5 Other restriction (specify)					
	(STRING 255)					
^ I I						
4LL 7.	Are students who go to the cafeteria or food service area during their lunch period required to					
٠.	stay there for the full lunch period?					
	Yes, all students must stay for the full lunch period					
	2 O No, some students may leave (either with or without special permission)					
	3 O No, any student may leave					
7=2	OR 3					
	When are students allowed to leave the cafeteria or food service area during the lunch period?					
8.						
8.	After a certain point (for example, after the first 15 minutes or when they have finished eating)					

-	•	_		4
•	-1	u	_	1

- 9. Are other school activities, such as tutoring sessions, club meetings, bake sales, or other fundraisers ever scheduled during meal times (breakfast or lunch)?
 - 1 O Yes

o **O** No

SOFT CHECK: IF Q9=NO RESPONSE: Your response to this question is important. Please provide a response and continue.

Q3=1 AND Q9=1

9a. On average, how often are the following types of activities scheduled during the breakfast period?

PROGRAMMER: CODE ONE PER ROW

SELECT ONE RESPONSE FOR EACH ACTIVITY

	EVERY DAY	3-4X PER WEEK	1-2X PER WEEK	LESS THAN 1X PER WEEK OR NEVER
a. Tutoring sessions	1 O 1	2 O	O ε	4 O
b. Club meetings	O 1	₂ O	O _E	4 O
 c. Fundraisers selling ready-to-eat foods like pizza, snacks, or other foods 	1 O	2 Q	O 6	4 O
d. Bake sales	O 1	₂ O	O _E	4 O
e. Fundraisers selling foods not intended for consumption in school, like frozen pizza or cookie dough	1 O	₂ O	з О	4 O
f. Other (specify)	O 1	₂ O	O _E	4 O
(STRING 255)				

SOFT CHECK: IF Q9a_a=NO RESPONSE ... Q9a_e=NO RESPONSE (missing for any response besides Other): Your response to this question is important. Please provide a response and continue.

ALL

9b. On average, how often are the following types of activities scheduled during the <u>lunch</u> period?

PROGRAMMER: CODE ONE PER ROW

SELECT ONE RESPONSE FOR EACH ACTIVITY

	EVERY DAY	3-4X PER WEEK	1-2X PER WEEK	LESS THAN 1X PER WEEK OR NEVER
a. Tutoring sessions	O 1	₂ O	O ε	4 O
b. Club meetings	O 1	₂ O	O _E	4 O
 c. Fundraisers selling ready-to-eat foods like pizza, snacks, or other foods 	O 1	2 O	3 O	4 O
d. Bake sales	O 1	₂ O	O _E	4 O
e. Fundraisers selling foods not intended for consumption in school, like frozen pizza or cookie dough	1 O	2 O	3 O	4 O
f. Pep rallies	O 1	₂ O	O _E	4 O
g. Other (specify)	O 1	₂ O	O _E	4 O
(STRING 255)				

SOFT CHECK: IF Q9b_a=NO RESPONSE OR Q9b_b=NO RESPONSE OR...Q9b_f=NO RESPONSE (missing for any response besides Other): Your response to this question is important. Please provide a response and continue.

ALL

10. Does your school use block scheduling?

- 1 O Yes
- o **O** No

LEVELCCD=E OR M

- 11. Does your school have recess?
 - 1 O Yes
 - ₀ O N₀ GO TO Q13

Q11=1 AND LEVELCCD= E OR M
12. Do any students have recess immediately before lunch?
1 O Yes 0 O No
Q11=1 AND LEVELCCD= E OR M
•
12a. Do any students have recess immediately after lunch? 1 O Yes
o O No
Q11=1 AND LEVELCCD = E OR M
12b. Are students allowed to go out to recess before the official end of their lunch period?
 Yes No
Q11=1 AND LEVELCCD= E OR M
12c. Are there any rules about when students can go out to recess?
1 O Yes
o O No
Q11=1 AND (LEVELCCD = E OR M) AND Q12C=1
12d. Which of the following rules does your school use about when students can go out to recess?
SELECT ALL THAT APPLY
$_{\scriptscriptstyle 1}$ Students may leave after a specified time interval
$_2$ \square Students must eat lunch first
$_3$ \square Students are dismissed in a group
$_4$ \square Rules vary by grade
5 🔲 Teachers/lunchroom staff have discretion
$_{6}$ \square Adult supervision must be available
on The state of t
(STRING 255)
Q11=1 AND LEVELCCD= E OR M
12e. Among students who have recess, on average how many minutes of recess do they receive per day?
MINUTES PER DAY (RANGE: 0 – 60)

VENDING MACHINES

^	- 1
Д	- 1

13. Does your school offer competitive foods and beverages to students through beverage or snack vending machines in your school or on the school grounds? Competitive foods and beverages are items that are not part of a reimbursable meal.

PROGRAMMER: CODE ONE PER ROW

SELECT	ONF	PFR	ROW
--------	-----	-----	-----

		YES	NO
a.	Beverage vending machine(s)	1 O	° O
b.	Snack vending machine(s)	1 O	O 0

 ${\tt SOFT\ CHECK:\ IF\ Q13_a\ or\ Q13_b=NO\ RESPONSE:\ \textbf{Your\ response\ to\ this\ question\ is\ important.\ Please\ provide\ a\ response\ and\ continue.}}$

Q13_A=1 OR Q13_B=1

14. Where are vending machines available to students in your school or on the school grounds?

SELECT ALL THAT APPLY

- Food service area(s) (indoor or outdoor area(s) where meals are served/eaten)
- $_2$ Other indoor area(s)
- 3 ☐ Other outside areas (on school grounds)

O13	A — 1
UI5	A- I

14a. Not counting machines that sell only milk, 100% juice, or water, when can students use beverage machines? Please indicate if machines are available both inside or outside the food service area.

PROGRAMMER: CODE ALL THAT APPLY

PROGRAMMER: MAKE OPTION A (NO OTHER MACHINES IN AREA) AN EXCLUSIVE RESPONSE BY COLUMN; NO OTHER RESPONSES IN A COLUMN SHOULD BE ALLOWED IF OPTION A IS SELECTED

SELECT ALL THAT APPLY FOR EACH LOCATION

		INSIDE THE FOOD SERVICE AREA	OUTSIDE OF THE FOOD SERVICE AREA
a.	Not applicable. All machines sell only milk, 100% juice, or water.	1 🗆	2 🗆
b.	Before school	1 🗆	2 🔲
C.	During breakfast	1 🗆	2 🗆
d.	During school hours, before lunch	1 🗆	2 🔲
e.	During lunch	1 🗆	2 🔲
f.	After lunch, before end of last regular class	1 🗆	2 🔲
g.	After last regular class After last regular class is defined as any time 30 minutes after the end of the official school day	1 🗆	2 🗆
h.	Other (specify)	1 🗆	2 🗌
	(STRING 255)		

SOFT CHECK: IF Q14a COLUMN 1=NO RESPONSE OR Q14a COLUMN 2=NO RESPONSE: Your response to this question is important. Please provide a response for each location and continue.

Q13_B=1

15. When can students use snack machines or other machines containing snack foods? Please indicate whether machines are available both inside or outside the food service area.

PROGRAMMER: CODE ALL THAT APPLY

PROGRAMMER: MAKE OPTION A (NOT APPLICABLE) AN EXCLUSIVE RESPONSE BY COLUMN; NO OTHER RESPONSES IN THE COLUMN SHOULD BE ALLOWED IF OPTION A IS SELECTED.

SELECT ALL THAT APPLY FOR EACH LOCATION

		INSIDE THE FOOD SERVICE AREA	OUTSIDE OF THE FOOD SERVICE AREA
a.	Not applicable. No machines with snack foods in this area.	1 🗆	2 🗆
b.	Before school	1 □	2 🔲
c.	During breakfast	1 🗆	2 🔲
d.	During school hours, before lunch	1 🗆	2 🗆
e.	During lunch	1 🗆	2 🔲
f.	After lunch, before end of last regular class	1 🗆	2 🗆
g.	After last regular class After last regular class is defined as any time 30 minutes after the end of the official school day	1 🗆	2 🗆
h.	Other (specify)	1 🗆	2 🗌
	(STRING 255)		

SOFT CHECK: IF Q15 COLUMN 1=NO RESPONSE OR Q15 COLUMN 2=NO RESPONSE: Your response to this question is important. Please provide a response for each location and continue.

Q13 A=1 OR Q13 B=1	O13	A=1	OR	013	B=1
--------------------	-----	-----	----	-----	-----

16. Who receives revenue or profit from vending machines in your school? Include all machines in your school or on the school grounds, regardless of location or type.

SE	ELEC	T ALL THAT APPLY
1		School food service
2		The school or departments other than the school food service
3		District departments other than the school food service
4		Student organization (student council/clubs/activities)
5		DECA or a business or marketing department/class
6		Parent organization
7		Other (specify)
		(STRING 255)
d		Don't know [PROGRAMMER: Make this response option exclusive.]

SCHOOL STORES, SNACK BARS, AND FOOD CARTS/KIOSKS

ALL	
17.	Does your school have a school store that sells foods or beverages (including snack foods)?
	₁ O Yes
	$_{0}$ \odot No
SOF	T CHECK: IF Q17=NO RESPONSE: Your response to this question is important. Please provide a
resp	onse and continue.
Q17=	1
18.	What days of the week is the school store usually open?
	SELECT ALL THAT APPLY
	1 Monday
	2
	₃ ☐ Wednesday
	4 \square Thursday
	5 🗆 Friday
	6 O Various or no set schedule

Q	17	'=1

18a. When is the store usually open to students?

	SI	ELEC	CT ALL THAT APPLY
	1		Before school
	2		During breakfast
	3		During school hours, before lunch
	4		During lunch
	5		After lunch, before end of last regular class
	6		After last regular class (any time 30 minutes after the end of the official school day)
Q17=	:1		
18b.	Wł	no is	responsible for the school store?
	SI	ELEC	CT ALL THAT APPLY
	1		School food service
	2		Principal
	3		Athletic department
	4		Student club
	5		Parent organization
	6		DECA or a business or marketing department/class
	7		School culinary arts program
	8		Other school department (specify)
			(STRING 255)
	9		Other (specify)
			(STRING 255)

d Don't know [PROGRAMMER: Make this response option exclusive]

Q17=1	
18c.	Who receives revenue or profit from the school store?
SELE	ECT ALL THAT APPLY
1 [School food service
2 _	The school or departments other than the school food service
3 _	District departments other than the school food service
4 L	Student organization (student council/clubs/activities) DECA or a business or marketing department/class
5 L 6 L	School culinary arts program
_	
. =	_
8 L	(STRING 255)
	(3111110 233)
d \Box	Don't know [PROGRAMMER: Make this response option exclusive.]
	CK: IF 18c=NO RESPONSE: Your response to this question is important. Please provide a
response a	and continue.
ALL	
10d Outcido	of the food service area, do you have a snack bar, food cart/kiosk or other place that prepares or
	s food but does not offer reimbursable meals?
1 (Yes Yes
0) No
COET CHE	CIV. IF O10d-NO DESDONICE: Value recommend to this guardian is important. Places provide a
	CK: IF Q18d=NO RESPONSE: Your response to this question is important. Please provide a and continue.
Q18d=1	
19. What	days of the week is the snack bar/food cart/kiosk open?
SELE	ECT ALL THAT APPLY
1 🗆	Monday
2	Tuesday
3	Wednesday
4	Thursday
5	Friday
6	Various or no set schedule

Q18d=1	1	
19a.		When is the snack bar/food cart/kiosk usually open to students?
	SEL E	CT ALL THAT APPLY
	_	
	1 📙	Before school
	2 📙	During breakfast
	3 📙	During school hours, before lunch
	4	During lunch
	5 📙	After lunch, before end of last regular class
	6	After last regular class. After last regular class is defined as any time 30 minutes after the end of the official school day.
		ond of the emetal contest day.
Q18d=1	L	
19b.		Who receives revenue or profit from the snack bar/food cart/kiosk?
	SELEC	CT ALL THAT APPLY
	1	School food service
	2 🗌	School departments other than the school food service
	з 🗌	District departments other than the school food service
	4	Student organization (student council/clubs/activities)
	5	DECA or a business or marketing department/class
	6	School culinary arts program
	7	Parent organization
	8 🗌	Other (specify)
		(STRING 255)
	d \square	Don't know [PROGRAMMER: Make this response option exclusive]

NUTRITION EDUCATION AND PROMOTION/WELLNESS

ALL		
20.		ch of the following national, state, or local nutrition or wellness initiatives is your school ed? Please exclude district or school wellness policies.
	SELEC	CT ALL THAT APPLY
	1 🗆	Healthy Schools Program (Alliance for a Healthier Generation)
	2 🗌	Fuel Up to Play 60
	3	Fruits and Veggies – More Matters
	4	Healthy Kids Challenge
	5	CATCH (Coordinated Approach to Child Health)
	6	Game On! The Ultimate Wellness Challenge (Action for Healthy Kids)
	7	USDA's Team Nutrition
	8 🗌	USDA's Farm to School Program
	9 🗌	Carol M. White Physical Education Program (PEP)
	10	FitnessGram
	11 🗆	Jump Rope for Heart (American Heart Association)
	12	School, district, or community nutrition or wellness initiative
	13	Other (specify)
		(STRING 255)
		None, our school does not participate in any national, state, or local nutrition/wellness initiatives other than a district or school wellness policy [PROGRAMMER: <i>Make this response option exclusive</i>]

Λ1	
ΑI	

21. Does your school incorporate nutrition or agriculture-based education or activities into the curriculum?

PROGRAMMER: CODE ONE PER ROW

SELECT ONE PER ROW

	YES	NO
a. Nutrition education or activities	1 O	O 0
b. Agriculture-based education or activities	1 O	O 0

SOFT CHECK: IF Q21_a or Q21_b=NO RESPONSE: Your response to this question is important. Please provide a response and continue.

Q21_A=1

- 22. Does your school have a requirement that students receive nutrition education in class?
 - 1 O Yes
 - $_{0}$ O No

SOFT CHECK: IF Q22=NO RESPONSE: Your response to this question is important. Please provide a response and continue.

Q22=1

- 23. Does this nutrition education requirement apply to all students?
 - 1 O Yes
 - o O No

Q21 A=1

24. On average, how much nutrition education do students receive in class? Please answer in either hours or minutes, then select the time frame for your response below.

PROGRAMMER: DO NOT ALLOW BOTH HOURS AND MINUTES TO BE RECORDED.

|__|__| HOURS (RANGE 0-999)
OR

|__|__| MINUTES (RANGE 0-999)

- 1 O Per week
- 2 O Per month
- 3 O Per year

SOFT CHECK: IF entered minutes or hours for Q24 without selecting week, month, or year: Please select whether students received [FILL] [hours/minutes] per week, month or year.

ALL

25. Does your school include structured physical education classes for students?

PRINCIF	PAL SURVEY				
	Yes, and it is a requirement for some or all grade levels Yes, but it is not required for any grade level No, school does not offer physical education to any students				
Q25=	Q25=1 OR 2				
26.	Do students take physical education classes throughout the year or only for a portion of the year? 1 O Throughout the year 2 O One semester or half the school year 3 O One quarter of the school year 4 O Some other amount of time				
Q25=	1 OR 2				
27 .	When students take physical education, on average, how much time do they spend in physical education classes each week?				
	Please answer in either hours OR minutes.				
	PROGRAMMER: DO NOT ALLOW BOTH HOURS AND MINUTES TO BE RECORDED.				
	. HOURS (RANGE 0.00-8.00) OR				
	MINUTES (RANGE 0-480)				
ALL					
28.	Does your school have a school wellness policy in addition to the district wellness policy?				

YesNo

d O Don't know

SUBMIT SCREEN





Thank you for completing the School Nutrition and Meal Cost Study-II Principal Survey!

<u>Please review and print a copy of your responses by clicking here</u>. If you are satisfied with your responses, please click on the submit button below. Once you submit your survey, you will not be able to make any additional changes. If you need to correct anything, please contact the help desk at XXXX@xxxx.com or xxx-xxx (toll-free) for assistance.

SCREEN TO DISPLAY IF SOMEONE TRIES TO LOG IN TO A SUBMITTED SURVEY





Thank you for your interest in completing the School Nutrition and Meal Cost Study-II Principal Survey. Someone from your school submitted the survey on [date]. If you believe you are getting this message in error, please contact the help desk at XXXX@xxxx.com or xxx-xxxx-xxxx (toll-free) for assistance.

