

## APPENDIX F03.07. PRINCIPAL SURVEY (GROUPS 2A AND 3)

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OMB Number: 0584-XXXX

Expiration Date: XX/XX/20XX

This information is being collected to assist the Food and Nutrition Service in understanding school food purchasing practices, the nutritional quality of school meals and snacks, the cost to produce school meals, and student participation and dietary intakes. This is a mandatory collection and FNS will use the information to monitor program operations. This collection does not request any personally identifiable information under the Privacy Act of 1974. 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 0.50 hours 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. 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, 1320 Braddock Place, 5th Floor, Alexandria, VA 22314 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

# **2024-2025 National School Foods Study**

## ***Principal Survey***

Load Variable	Variable Name	Description	Values
SCHOOL LEVEL	SchoolType	Elementary, Middle, High	E, M, H
SCHOOL NAME	SchoolName	Name of school	<String>
ENROLLMENT	TotalEnrollment	Number of students enrolled at school	<Num>
WAVE	Wave	Wave number	<Num>
BATCH	Batch	Batch number	<Num>
EMAIL	Email	Email address	<String>
PHONE NUMBER	PhoneNumber	Phone number	<Num>
EXTENSION	Extension	Extension for phone number	<Num>
FIRST NAME	FirstName	Participant's first name	<String>
LAST NAME	LastName	Participant's last name	<String>
MPR ID	MPRID	Number assigned by Mathematica	<Num>

**PROGRAMMER:**

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

## INSTRUCTIONS SCREEN

### Instructions

- 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.
- Under the terms of Section 28 of the Richard B. Russell National School Lunch Act, institutions participating in the school meals programs are required to participate in this data collection. Taking part in the study is voluntary for parents/guardians and children. The decision to participate will not affect any USDA benefits received by institutions or families participating in this data collection.
- Your responses will not be disclosed in identifiable form without your consent.
- The information you provide will be used only for statistical purposes.
- Please answer all of the questions to the best of your ability.
- You may complete the survey all at once or save your responses and return at a later time.
- If you are returning to finish your saved survey, you will return to the point where you left off.
- Please use the buttons at the bottom of each page to move through the survey. You may need to scroll down on the page to view the "Forward" button. Using your browser's "Back" function may cause errors.

If you have any questions about the study or about completing this survey, please contact the study team by email at [EMAIL] or by phone at [PHONE] (toll-free).

VERIFICATION SCREEN

ALL

A. We will be asking you questions about [FILL SCHOOL NAME]. If this is not the name of your school, please call [PHONE].

ALL

B. Please enter your name, phone number (XXX-XXX-XXXX), and email address so we can contact you if we have any questions about the survey.

1. First Name

(STRING 20)

2. Last Name

(STRING 20)

3. Phone Number

(Phone number format: (XXX-XXX-XXXX))

4. Email Address

(STRING 40)

SOFT CHECK: IF B=NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to continue?

## SCHOOL CHARACTERISTICS AND SCHOOL MEAL POLICIES

ALL

**1. What grades are included in your school?**

*Please ensure that the "To" grade is greater than or equal to the "From" grade.*

PROGRAMMER: DROP-DOWN 1 RANGE: PRE-K (-1) TO 12 (12) ; DROP-DOWN 2 RANGE: K (0) TO 12 (12)

#1\_1. From Grade #2\_1. To Grade

|\_|\_| to |\_|\_|

SOFT CHECK: IF Q1=NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**

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?**

☐ Yes

☐ 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=NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**

SOFT CHECK: IF Q1b >1,000: **You entered that total enrollment at [NAME OF SCHOOL] is greater than 1,000 students. Please confirm or correct your response and continue.**

ALL

2. Of the [ConfirmedTotalEnrollment] students enrolled at your school, what is the average daily attendance?

Please click to select either number of students OR percent of students, then enter a number.

PROGRAMER: MAKE RESPONSE OPTIONS EXCLUSIVE SO RESPONDENTS CANNOT ENTER BOTH A NUMBER AND A PERCENTAGE.

|\_|\_|\_|\_| 1. STUDENTS (1)

(RANGE 1-9,999)

OR

|\_|\_|\_|\_| 2. PERCENT(RANGE 1-100%) (2)

SOFT CHECK: IF Q2=NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**

SOFT CHECK: IF Q2 NUMBER OF STUDENTS>ENROLLMENT FROM 1A OR 1B: Please enter a number of students between 1 and 9,999 or a percentage between 1 and 100.

SOFT CHECK: IF Q2 NUMBER OF STUDENTS>ENROLLMENT FROM 1A OR 1B: Please enter a number of students less than the total number enrolled in your school.

ALL

3. Does your school participate in the School Breakfast Program (SBP)?

☐ Yes

☐ No

HARD CHECK: IF Q3=NO RESPONSE: **Please answer this question.**

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 attend school in a different location during the meal periods?

☐ Yes

☐ No

SOFT CHECK: IF Q4=NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**



Q4=1

4a. For how many of the [ConfirmedTotalEnrollment] students is lunch unavailable?

|\_|\_|\_|\_| STUDENTS FOR WHOM LUNCH IS UNAVAILABLE (RANGE: 0-5,000)

SOFT CHECK: IF Q4a=NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**

SOFT CHECK: IF Q4a > ENROLLMENT FROM 1A OR 1B: **Please enter a number of students less than the total number enrolled in your school.**

Q3=1 AND Q4=1

4b. For how many of the [ConfirmedTotalEnrollment] students is breakfast unavailable?

|\_|\_|\_|\_| STUDENTS FOR WHOM BREAKFAST IS UNAVAILABLE (RANGE: 0-5,000)

SOFT CHECK: IF Q4b > ConfirmedTotalEnrollment: **Please enter a number of students less than the total number 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?

☐ Yes

☐ No

Q5=0

5a. Where may students go during their lunch period?

**SELECT ALL THAT APPLY**

☐ Food service area/cafeteria or other area where meals are served

☐ Classroom but only with teacher permission

☐ Classrooms open to students during lunch period

☐ Library

☐ Gym

☐ Computer lab or media center

☐ Outside, on campus

☐ Other designated area on campus, such as hallways, student commons

☐ Anywhere on campus

☐ Off-campus/home

☐ 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?**

**SELECT ALL THAT APPLY**

- 1 ☐ Fast food restaurants
- 2 ☐ Other restaurants, cafeterias, or diners
- 3 ☐ Supermarkets, convenience stores, or other stores
- 4 ☐ Off-campus lunch wagons, food trucks, or push carts not operated by the school meals program
- 5 ☐ Home or home of relative or friend
- 6 ☐ 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 ☒ Yes, for all students
- 2 ☒ Yes, for some students
- 3 ☒ No rules; students may buy a la carte foods under any circumstances
- 4 ☒ School does not have a la carte foods

Q6=1 OR 2

**6a. What are those rules? A la carte foods may be purchased . . .**

**SELECT ALL THAT APPLY**

- 1 ☐ If a student takes a reimbursable meal
- 2 ☐ If a student brings lunch from home
- 3 ☐ After a student has eaten their meal (whether reimbursable or brought from home)
- 4 ☐ If all students have had the opportunity to take a reimbursable meal
- 5 ☐ If students have a positive account balance
- 6 ☐ When students have parent permission
- 7 ☐ Other restriction (*specify*)

(STRING 255)

ALL

**7. Are students who go to the cafeteria or food service area during their lunch period required to stay there for the full lunch period?**

- 1 ☒ All students must stay for the full lunch period
- 2 ☒ Some students may leave (either with or without special permission)
- 3 ☒ Any student may leave

Q7=2 OR 3

8. When are students allowed to leave the cafeteria or food service area during the lunch period?

- 1 ☐ After a certain point (for example, after the first 15 minutes or when they have finished eating)
- 2 ☐ At any time during the lunch period

ALL

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 ☐ Yes
- 0 ☐ No

SOFT CHECK: IF Q9=NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to 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
1. Tutoring sessions	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
2. Club meetings	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
3. Fundraisers selling ready-to-eat foods like pizza, snacks, or other foods	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
4. Bake sales	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
5. Fundraisers selling foods not intended for consumption in school, like frozen pizza or cookie dough	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

SOFT CHECK: IF Q9a\_1-5=NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to continue?

9a\_other. How often are other activities scheduled during the breakfast period?

	EVERY DAY	3-4X PER WEEK	1-2X PER WEEK	LESS THAN 1X PER WEEK OR NEVER
1. Other (specify)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

(STRING 255)

Q9=1

**9b. On average, how often are the following types of activities scheduled during the lunch 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
1. Tutoring sessions	<sub>1</sub> m	<sub>2</sub> m	<sub>3</sub> m	<sub>4</sub> m
2. Club meetings	<sub>1</sub> m	<sub>2</sub> m	<sub>3</sub> m	<sub>4</sub> m
3. Fundraisers selling ready-to-eat foods like pizza, snacks, or other foods	<sub>1</sub> m	<sub>2</sub> m	<sub>3</sub> m	<sub>4</sub> m
4. Bake sales	<sub>1</sub> m	<sub>2</sub> m	<sub>3</sub> m	<sub>4</sub> m
5. Fundraisers selling foods not intended for consumption in school, like frozen pizza or cookie dough	<sub>1</sub> m	<sub>2</sub> m	<sub>3</sub> m	<sub>4</sub> m
6. Pep rallies	<sub>1</sub> m	<sub>2</sub> m	<sub>3</sub> m	<sub>4</sub> m

SOFT CHECK: IF Q9b\_1-5=NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to continue?

**9b\_other. How often are other activities scheduled during the lunch period?**

	EVERY DAY	3-4X PER WEEK	1-2X PER WEEK	LESS THAN 1X PER WEEK OR NEVER
1. Other (specify)	<sub>1</sub> m	<sub>2</sub> m	<sub>3</sub> m	<sub>4</sub> m

(STRING 255)

ALL

**10. Does your school use block scheduling?**

- <sub>1</sub> m Yes  
<sub>0</sub> m No

SCHOOLTYPE=E OR M

**11. Does your school have recess?**

- <sub>1</sub> m Yes  
<sub>0</sub> m No      **GO TO Q13**

Q11=1 AND SCHOOLTYPE= E OR M

**12. Do any students have recess immediately before lunch?**

☐ Yes

☐ No

Q11=1 AND SCHOOLTYPE= E OR M

**12a. Do any students have recess immediately after lunch?**

☐ Yes

☐ No

Q11=1 AND Q12A =1 AND SCHOOLTYPE = 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 SCHOOLTYPE= E OR M

**12c. Are there any rules about when students can go out to recess?**

☐ Yes

☐ No

Q11=1 AND (SCHOOLTYPE = 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**

☐ Students may leave after a specified time interval

☐ Students must eat lunch first

☐ Students are dismissed in a group

☐ Rules vary by grade

☐ Teachers/lunchroom staff have discretion

☐ Adult supervision must be available

☐ Other (*specify*)

(STRING 255)

Q11=1 AND SCHOOLTYPE= 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

ALL

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 ONE PER ROW

	YES	NO
1. Beverage vending machine(s)	<sub>1</sub> m	<sub>0</sub> m
2. Snack vending machine(s)	<sub>1</sub> m	<sub>0</sub> m

SOFT CHECK: IF Q13=NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**

Q13\_1=1 OR Q13\_2=1

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

SELECT ALL THAT APPLY

- <sub>1</sub> ☐ Food service area(s) (indoor or outdoor area(s) where meals are served/eaten)
- <sub>2</sub> ☐ Other indoor area(s)
- <sub>3</sub> ☐ Other outside areas (on school grounds)

Q13\_1=1

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
1. Not applicable. All machines sell only milk, 100% juice, or water.	1 <input type="checkbox"/>	2 <input type="checkbox"/>
2. Before school	1 <input type="checkbox"/>	2 <input type="checkbox"/>
3. During breakfast	1 <input type="checkbox"/>	2 <input type="checkbox"/>
4. During school hours, before lunch	1 <input type="checkbox"/>	2 <input type="checkbox"/>
5. During lunch	1 <input type="checkbox"/>	2 <input type="checkbox"/>
6. After lunch, before end of last regular class	1 <input type="checkbox"/>	2 <input type="checkbox"/>
7. After last regular class <i>After last regular class is defined as any time <b>30 minutes after</b> the end of the official school day</i>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
8. Other ( <i>specify</i> )	1 <input type="checkbox"/>	2 <input type="checkbox"/>
<div>(STRING 255)</div>		

Q13\_2=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
1. Not applicable. No machines with snack foods in this area.	1 <input type="checkbox"/>	2 <input type="checkbox"/>
2. Before school	1 <input type="checkbox"/>	2 <input type="checkbox"/>
3. During breakfast	1 <input type="checkbox"/>	2 <input type="checkbox"/>
4. During school hours, before lunch	1 <input type="checkbox"/>	2 <input type="checkbox"/>
5. During lunch	1 <input type="checkbox"/>	2 <input type="checkbox"/>
6. After lunch, before end of last regular class	1 <input type="checkbox"/>	2 <input type="checkbox"/>
7. After last regular class <i>After last regular class is defined as any time within 30 minutes after the end of the official school day</i>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
8. Other (specify)	1 <input type="checkbox"/>	2 <input type="checkbox"/>
<div>(STRING 255)</div>		



Q13\_1=1 OR Q13\_2=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.

**SELECT 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, formerly Distributive Education Clubs of America, or a business or marketing department/class
- 6 ☐ Parent organization
- 7 ☐ Other (*specify*)

(STRING 255)

- 9 ☐ 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)?

☐ Yes

☐ No

SOFT CHECK: IF Q17=NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to continue?

Q17=1

18. What days of the week is the school store usually open?

SELECT ALL THAT APPLY

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

☐ Various or no set schedule [PROGRAMMER: Make this response option exclusive]

Q17=1

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

SELECT ALL THAT APPLY

☐ Before school

☐ During breakfast

☐ During school hours, before lunch

☐ During lunch

☐ After lunch, before end of last regular class

☐ After last regular class (any time **30 minutes after** the end of the official school day)

Q17=1

18b. Who is responsible for the school store?

SELECT ALL THAT APPLY

☐ School food service

☐ Principal

☐ Athletic department

☐ Student club/students

☐ Parent organization

☐ 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)
- 9 ☐ Don't know *[PROGRAMMER: Make this response option exclusive]*

Q17=1

**18c. Who receives revenue or profit from the school store?**

**SELECT 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 ☐ School culinary arts program
- 7 ☐ Parent organization
- 8 ☐ Other *(specify)*  

(STRING 255)
- 9 ☐ Don't know *[PROGRAMMER: Make this response option exclusive.]*

**SOFT CHECK: IF Q18c=NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to continue?**

ALL

**18d. Outside of the food service area, do you have a snack bar, food cart/kiosk or other place that prepares or serves food but does not offer reimbursable meals?**

- 1 ☐ Yes  
0 ☐ No

SOFT CHECK: IF Q18c=NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to continue?

Q18d=1

**19. What days of the week is the snack bar/food cart/kiosk open?**

**SELECT ALL THAT APPLY**

- 1 ☐ Monday  
2 ☐ Tuesday  
3 ☐ Wednesday  
4 ☐ Thursday  
5 ☐ Friday  
6 ☐ Various or no set schedule *[PROGRAMMER: Make this response option exclusive]*

Q18d=1

**19a. When is the snack bar/food cart/kiosk usually open to students?**

**SELECT 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).*

Q18d=1

**19b. Who receives revenue or profit from the snack bar/food cart/kiosk?**

**SELECT ALL THAT APPLY**

- 1 ☐ School food service
- 2 ☐ School 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 ☐ School culinary arts program
- 7 ☐ Parent organization
- 8 ☐ Other (*specify*)

(STRING 255)

- 9 ☐ Don't know [*PROGRAMMER: Make this response option exclusive*]

## NUTRITION EDUCATION AND PROMOTION/WELLNESS

ALL

**20. In which of the following national, state, or local nutrition or wellness initiatives is your school involved? Please exclude district or school wellness policies.**

**SELECT 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 Nutrition education as part of 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)

- ☐ -8 None, our school does not participate in any national, state, or local nutrition/wellness initiatives other than a district or school wellness policy [PROGRAMMER: *Make this response option exclusive*]

ALL

**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
1.	Nutrition education or activities	<input type="checkbox"/> 1 m	<input type="checkbox"/> 0 m
2.	Agriculture-based education or activities	<input type="checkbox"/> 1 m	<input type="checkbox"/> 0 m

**SOFT CHECK: IF Q21\_1 or Q21\_2 =NO RESPONSE: There is/are [X] unanswered question(s) on this page. Would you like to continue?**

Q21\_1=1

**22. Does your school have a requirement that students receive nutrition education as part of their classroom learning?**

- ☐ Yes
- ☐ No

SOFT CHECK: IF Q21\_1 or Q21\_2 =NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**

Q22=1

**23. Does this nutrition education requirement apply to all students?**

- ☐ Yes, it is a requirement for all grade levels
- ☐ No, it only applies to some grade levels

Q21\_1=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.

|\_|\_|\_| 1. HOURS (RANGE 0-999)

OR

|\_|\_|\_| 2. MINUTES (RANGE 0-999)

SOFT CHECK: IF Q24 =NO RESPONSE: **There is/are [X] unanswered question(s) on this page. Would you like to continue?**

**24a.**

- ☐ Per week
- ☐ Per month
- ☐ Per year

SOFT CHECK: IF entered minutes or hours for Q24 without selecting week, month, or year: Please select whether the value you entered is per week, month, or year.

ALL

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

- ☐ 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=1 OR 2

**26. Do students take physical education classes throughout the year or only for a portion of the year?**

- ☐ Throughout the year
- ☐ One semester or half the school year
- ☐ One quarter of the school year
- ☐ Some other amount of time
- ☐ It depends on the student

Q26 = 1 OR 2 OR 3 OR 4 OR 5

**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.

|\_|. |\_|\_| 1. HOURS PER WEEK

(RANGE 0.00-8.00)

OR

|\_|\_|\_| 2. MINUTES PER WEEK

(RANGE 0-480)

SOFT CHECK: IF Q27 HOURS PER WEEK > 8 or < 0: **Please enter a number between 0.00 and 8.00 hours**

SOFT CHECK: IF Q27 MINUTES PER WEEK > 480 or < 0: **Please enter a number between 0 and 480 minutes**

ALL

**28. Does your school have a school wellness policy in addition to the district wellness policy?**

- ☐ Yes
- ☐ No
- ☐ Don't know



SUBMIT SCREEN

***Thank you for completing the 2024-2025 National School Foods Study Principal Survey!***

Your response has been recorded.

Please close your browser window to exit.

You can review and print a copy of your responses by clicking on "download PDF." If you need to correct anything, please contact the help desk at [EMAIL] or [PHONE] (toll-free) for assistance.