



Kids Healthy Outdoors Challenge (KHOC)
School Year 2013-2014

APPLICATION TO PARTICIPATE

(Note: Schools that participated in the 2012-13 project year are not eligible to apply.)

Applicant Contact Information

School Name: _____

School District: _____

School Address: _____

Principal Name: _____

Principal Phone Number: _____

Principal e-mail address: _____

Name(s) of Proposed Third Grade Teacher Champion(s) – Please identify one or two:

Phone numbers and e-mail addresses of Teacher Champion(s):

1. _____

2. _____

(Please provider the e-mail address you most frequently use.)

About Your School: For the most recently available school year, please report your school's:

1. Total Enrollment:

2. Percent of students eligible for Free and Reduced Price Lunch:

3. Breakdown of student body by Race and Ethnicity:

4. Percent of students who are ESL:

5. The languages which are spoken by students in your school:

6. Type of School (Check one)

- Rural
- Urban
- Suburban

7. Briefly describe the neighborhood where your school is located. What kinds of assets/strengths are in the neighborhood or school community? How about problems in the neighborhood or school community that impact learning? Are there any nearby parks or natural places for kids to play?

Teacher Champion Questions: *(Please duplicate these questions if you have more than one teacher).*

8. How long have you been an educator? A third grade teacher?

9. Briefly tell us why you want to pilot *KHOC* in your classroom.

10. How experienced and comfortable are you in leading classroom activities outdoors?

11. What types of supports and training would help you become more comfortable?

School Participation Questions

12. On average, how many opportunities each school year do your classrooms *currently* have to participate in outdoor learning activities – either on or off site? Please provide brief examples of any such activities.

13. How many field trips do your third grade classrooms typically have each year? How many are in *outdoors* locations? Please provide brief examples of these trips.

14. Does your school currently receive any special project funding to address nutrition or physical activity? (e.g., a PEP grant, Team Nutrition grant, Action for Healthy Kids, private foundation funding, etc.). If so, please describe.

15. Has your school participated in any projects that required evaluation and data collection, such as student surveys? If so, can you tell us what data you collected and how you participated in the evaluation?

16. Is there anything else you would like reviewers to know about your school or your ability to participate in *KHOC*?

17. How did you hear about *KHOC*?

Signatures: *In signing this application, we agree to meet the expectations for participation in the KHOC pilot project.*

Principal Signature: _____ Date

Teacher Champion 1 Signature: _____ Date

Teacher Champion 2 Signature: _____ Date