

SCHOOL HEALTH PROFILE FORM

| Section 1: S | School Prof | file | | | | |
|-----------------------------------|-----------------------------------|----------------------------------|--------------|----------------------------------|----------------|-----------------------------|
| School Name: | School Without | Walls Senior High Sc | hool | | | |
| Street Address: | 2130 G Street N Washington, DC | | | | | |
| Does your scho | ol curently have | a website?: | | If yes, what is you | r school"s w | rebsite address?: |
| Yes | | | | www.swwhs.org | | |
| Section 2: 1 | Health Serv | vices | | | | |
| How many scho | ool nurses are av | ailable at your schoo | l?: | Does your school health center?: | currently h | ave a school-based |
| One | | | | Yes | | |
| School Nurse 1 | Coverage | | | School Nurse Cov | erage (Nurs | e 2): |
| Full | | | | | | |
| Name of Schoo Pearline Lee, RI | | Nurse 1 - Phone: 202-939-5982 | | - Email Address: .lee@dc.gov | Nurs | e 1 - Suite/Room Location: |
| Name of Schoo | l Nurse 2: | Nurse 2 - Phone: | Nurse 2 | - Email Address: | Nurs | e 2 - Suite/Room Location: |
| How many Dep | artment of Men | tal Health (DMH) Clir | nicians are | e available at your | school? | |
| DMH Clinician None | Coverage (Clinic | ian 1): | | DMH Clinician Co None | verage (Clin | ician 2): |
| Does your scho | ol currently have | e a DMH/ School Mei | ntal Healt | h Program or simi | lar services | on site |
| No | | | | | | |
| *If the school has the section 2. | nree or more school | nurses and/or DMH Clin | nicians plea | ase attach additional i | information or | each personnel requested in |
| Section 3: 1 | Health Edu | cation Instru | ction | | | |
| Does your schoo | l currently have | a certified health tea | cher on s | taff? | Ye | s |

Did that teacher have a concentration in health and physical education in college?

Yes

OOL HEALTH PROFILE FORM For each grade in your school, please indicate the average number of minutes per week during school hours students receive health education instruction. PK/PS - Prek- Minutes/Wee Grade 8 - Minutes/Week: K - Kindergarten - Minutes/Week: Grade 9 - Minutes/Week: 240 Grade 1 - Minutes/Week: Grade 10 - Minutes/Week: 240 Grade 2 - Minutes/Week: Grade 11 - Minutes/Week: 240 Grade 3 - Minutes/Week: Grade 12 - Minutes/Week: 240 Grade 4 - Minutes/Week: Grade 13/Postgraduate - Minutes/Week: Grade 5 - Minutes/Week: AE - Adult Education - Minutes/Week: Grade 6 - Minutes/Week: UG - Ungraded - Minutes/Week: Grade 7 - Minutes/Week: Is the health education instruction based on the District's health standards that specify what each student should know and be able to do to improve and maintain their health by the end of each grade level? Yes Section 4: Physical Education Instruction For each grade in your school, please indicate the average number of minutes per week during school hours students receive in physical education instruction. PK/PS - Prek- Minutes/Wee Grade 8 - Minutes/Week: Grade 9 - Minutes/Week: 240 K - Kindergarten - Minutes/Week: Grade 1 - Minutes/Week: Grade 10 - Minutes/Week: 240 Grade 2 - Minutes/Week: Grade 11 - Minutes/Week: 240 Grade 12 - Minutes/Week: Grade 3 - Minutes/Week: 240 Grade 4 - Minutes/Week: Grade 13/Postgraduate - Minutes/Week: Grade 5 - Minutes/Week: AE - Adult Education - Minutes/Week: Grade 6 - Minutes/Week: UG - Ungraded - Minutes/Week: Grade 7 - Minutes/Week: Is the physical education instruction based on the District's physical education standards that identify what each student should know and be able to do at the end of each grade levels? Yes For each grade in your school, please indicate the average number of minutes per week during school hours students receive in physical education instruction. PK/PS - Prek- Minutes/Wee Grade 8 - Minutes/Week: K - Kindergarten - Minutes/Week: Grade 9 - Minutes/Week: 120 Grade 1 - Minutes/Week: Grade 10 - Minutes/Week: 120 Grade 2 - Minutes/Week Grade 11 - Minutes/Week: 120 Grade 3 - Minutes/Week: Grade 12 - Minutes/Week: 120 Grade 4 - Minutes/Week: Grade 13/Postgraduate - Minutes/Week: Grade 5 - Minutes/Week: AE - Adult Education - Minutes/Week: Grade 6 - Minutes/Week: UG - Ungraded - Minutes/Week:

Grade 7 - Minutes/Week:

After-School Activities

How does your school promote physical activity? (Check all that apply)

, Movement in the Classroom , Athletic Programs

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, Walk or Bike to School , Field Trips

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Section 5: Nutrition Programs

| Chartwells | |
|--|--------------------------------|
| our Local Education Agency currently has a local wellness policy. Does your local wellness policy in | clude the following? |
| The goals for nutrition education, physical activity, and other school-based activities that are designed vellness? | d to promote student Yes |
| Nutrition guidelines for all foods available on each school campus during the school day with objective nealth and reducing childhood obesity? | es of promoting student Yes |
| A plan for measuring implementation for the local wellness policy, including designation of 1 or more education agency or each school, as appropriate, charged with operational responsibility for ensuring ocal wellness policy? | |
| Total Walliess policy: | Yes |
| Community involvement in the development of the school wellness policy? | |
| | Yes |
| Goals for improving the environmental sustainability of schools?: | |
| | Yes |
| Goals for increasing the use of locally-grown, locally processed, and unprocessed foods growers engaggriculture practices? | aged in sustainable |
| -ga p. aa | No |
| Increasing physical activity?: | V |
| | Yes |
| s your school currently in compliance of its local wellness policy? | Yes |
| Where can a copy of the policy be found? School Cafeteria or Eating Area , School Main Office | |
| | |
| | |
| Vhere are the following items located at your school? | |
| | |
| | |
| School Menu: School Main Office , School Cafeteria or Eating | |
| School Menu: School Main Office , School Cafeteria or Eating Nutritional Content of each Menu Item: School Cafeteria or Eating Areas , DCPS website | |
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SCHOOL HEALTH PROFILE FORM

| Section 5: Nutrition Progra | ams |
|---|---|
| Farm-to-School Program | |
| Does your school serve locally grown, processed, practices? Yes | and unprocessed foods from growers engaged in sustainable agricultural |
| If yes, how often?: | |
| everyday | |
| Locally-grown means grown in Washington, DC, New Jersey. Preference given to foods grown in V | Maryland, Virginia, Delaware, West Virginia, Pennsylvania, North Carolina, and Washington, DC, Maryland or Virginia). |
| Does your grower engage in sustainable agricultur | re practices? |
| application that will, over the long-term: (a) Satisfy natural resources base upon which the agriculture resources and on-farm resources and integrate, w | em of plant and animal production practices having a site-specific human food and fiber needs; (b) Enhance environmental quality and the economy depends; (c) Make the most efficient use of non renewable there appropriate, natural biological cycles and controls; (d) Sustain the ance the quality of life for farmers and society as a whole.) |
| Are students and parents informed about the ava | illability of vegetarian food options at your school? |
| If yes, where can they find these options? | |
| Are students and parents informed about the avalactose free milk, etc., at your school? | uilability of milk alternatives, such as soy milk, |
| If yes, where can they find these options? | |
| School Gardens Program | |
| Does your school currently have a School Garder | n? No |
| If no, is your school going to start a garden this se | chool year? No |
| Section 6: Posting and For | m Availability to Parents |
| | ol Act of 2010, "each public school and public charter school shall post the e school has a website and make the form available to parents in its office". |
| How will you make this information available to pa | arents? Online (posting date) |
| Online - Posi Date: | ting January 2011 |
| | Submitted: 1/5/2011 9:19:29 AM |
| | Submitter's Name : Lauren Dietz |
| | Submitter's Fmail Address: lauren dietz@dc.gov |