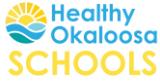




Healthy Okaloosa Schools Partnership Agreement Form



Our mission is to improve the health, safety, and well-being of school-age youth in Okaloosa County. Thank you for your interest in becoming a Healthy Okaloosa Schools partner. Please email your completed partnership form to Okaloosa-SchoolHealth@flhealth.gov or fax it to (850) 833-9258. If you have any questions, you may reach us at the e-mail address above or by phone at (850) 344-0660.



School Name: _____

Phone Number: _____ Fax Number: _____

Principal Name: _____

Principal Email: _____

Contact Name: _____

Contact Title: _____ Best Time to Contact: _____

Contact Email: _____

Webmaster Name: _____

Webmaster Email: _____

DOH-Okaloosa Healthy Okaloosa Schools (HOS) Responsibilities

- Provide Healthy Okaloosa Newsletters for students, families, and staff.
- Inform HOS partners of upcoming opportunities to promote health at their school.
- Offer educational lessons and content related to health and wellness.
- Provide health education resources to HOS partners (subject to availability).
- Provide opportunities for HOS partner training and meetings.
- Publicly recognize HOS partner achievements.

Healthy Okaloosa Schools Partner Responsibilities

- Promote the health and wellness message to students, families, and staff.
- Support healthy behaviors in the classroom and at home.
- Collaborate with DOH-Okaloosa to maintain your school's compliance with the OCSD Wellness Policy.
- Have school personnel present when DOH-Okaloosa leads presentations and/or activities on campus.
- Implement behavior management, if needed, during DOH-Okaloosa presentations and/or activities.
- Provide a 30-day written notice if you intend to end your partnership with DOH-Okaloosa.

Minimum Requirements for Healthy Okaloosa Schools Certification

1. Implement one actionable school-based goal every two years to promote health and wellness behaviors.
2. Implement one parent engagement activity annually to provide education on health and wellness.
3. Implement one whole-school activity annually to support health and wellness behaviors.
4. Provide documentation of health promotion activities.
5. Complete the School Health Index (SHI) at least once every two years.

Principal Signature _____

Contact Signature _____

Today's Date _____

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