



# Vermont FEED Farm-to-School Technical Assistance Application

For Office Use:
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Name of Lead Applicant \_\_\_\_\_ Email \_\_\_\_\_

Name of Applying School/District \_\_\_\_\_

Mailing Address \_\_\_\_\_

Town \_\_\_\_\_, VT Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Please fill in your school/district information:

Number of students _____	Number of classroom teachers _____
Number of other teaching staff _____	Number of food service staff _____
Number of students on free and reduced breakfast/lunch program _____	
What are the prices for: Student lunch _____ Adult lunch _____	
Do you have a summer feeding lunch program? ____ NO ____ YES	
If yes, how many children take part in it? _____	
On average, how many student lunches do you serve in a day? _____	
On average, how many adult lunches do you serve in a day? _____	

Please check the assistance options you might be interested in receiving from Vermont FEED:  
(this helps identify where your school's interest is, does not limit you or tie you to that option)

<input type="checkbox"/> Further Developing a Food/Wellness Council/Committee	<input type="checkbox"/> Teacher Ongoing Consulting
<input type="checkbox"/> Food Council Support/Consultation	<input type="checkbox"/> Parent/Volunteer Training Program
<input type="checkbox"/> Taste Test Plan	<input type="checkbox"/> Ongoing Consulting for Volunteer Program
<input type="checkbox"/> Taste Test Ongoing Consulting	<input type="checkbox"/> Local Purchasing Connections
<input type="checkbox"/> Food Service Professional Development	<input type="checkbox"/> Other _____
<input type="checkbox"/> Food Service Ongoing Consulting	_____
<input type="checkbox"/> Teacher Professional Development	_____
<input type="checkbox"/> Local Farm-based Field Studies for students	_____

## Vermont FEED Farm-to-School Technical Assistance Application

Does your school/community have a committee dedicated to food, nutrition, and/or wellness issues? If so, identify members and their role on the committee. \_\_\_ NO \_\_\_ YES and the members are:

NAME	EMAIL/PHONE	ROLE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

When was this committee formed? \_\_\_\_\_

How often does this committee meet? \_\_\_\_\_

Do you have any other in-school partners that are involved in your school food change efforts (not listed on committee)? \_\_\_ NO \_\_\_ YES, and they are:

NAME	EMAIL/PHONE	ROLE/INTERESTS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Vermont FEED Farm-to-School Technical Assistance Application

Do you have any other community partners that are involved in your school food change efforts (not listed on council)?  NO  YES, and they are:

NAME	EMAIL/PHONE/ADDRESS	ROLE/INTERESTS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you have any other farm/farmer partners that are involved in your school food change efforts (not listed on council)?  NO  YES, and they are:

NAME	EMAIL/PHONE/ADDRESS	ROLE/INTERESTS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has your committee had a FEED presentation before?  NO  YES If yes, when? \_\_\_\_\_  
If no, would you be interested in a short presentation?  NO  YES

Has your committee filled out a FEED Needs Assessment Tool?  NO  YES . IF no, would you be willing to?  NO  YES



## Vermont FEED Farm-to-School Needs Assessment

For Office Use:

1. What are the goals of your school's Food/Wellness committee?

2. In table below, please circle the number that best describes each audiences level of awareness, involvement, and support for your committee.

AUDIENCE	Awareness (1= unaware, 3= very aware)			Involvement (1= not involved, 3=very involved)			Supportive (1=not supportive, 3=very supportive)		
Students	1	2	3	1	2	3	1	2	3
Parents	1	2	3	1	2	3	1	2	3
Teachers	1	2	3	1	2	3	1	2	3
Food Service	1	2	3	1	2	3	1	2	3
Principal	1	2	3	1	2	3	1	2	3
School Board	1	2	3	1	2	3	1	2	3

3. Wellness Policy will be required by all Vermont school districts by 2006-07. What has your school/district done to address this issue?

4. In a couple brief sentences, please describe the strategies your committee thinks it will use to sustain the above listed goals in your school. (attach extra pages if you need more space)

**Vermont FEED Farm-to-School Needs Assessment**

5. Is there any nutrition/food/wellness curriculum currently being taught in your school? \_\_\_NO \_\_\_ YES  
If yes, who is teaching them, when and how often, and what topics are being covering?

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

If you need more space, please attach extra pages...

6. Is there any agriculture/farming/gardening lessons currently being taught in your school? \_\_\_NO \_\_\_ YES  
If yes, who is teaching them, when and how often and what topics are being covered?

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

Instructor \_\_\_\_\_ Grade(s) Reached \_\_\_\_\_ Frequency \_\_\_\_\_  
Topics covered \_\_\_\_\_  
\_\_\_\_\_

If you need more space, please attach extra pages...

7. Do any classes currently visit local farms/gardens/food producers off school grounds? \_\_\_NO \_\_\_YES

8. Where do they go? Please list the farms and gardens being used, how they are used, and who is leading these experiences.

9. Does your school have school gardens onsite? \_\_\_NO \_\_\_YES.  
If yes, who is the lead contact for the garden? (name and contact information

Name\_\_\_\_\_ Phone/Email\_\_\_\_\_

10: What is the purpose of the gardens? (classes, summer program, cafeteria, etc....)

11. Are there any other health or agriculture programs in place that we should be aware of?  
If yes, please describe them ...

12. Who is your food service contract with? (Independent, In-house, food management co., etc...)

13. Who makes the decisions about food purchasing and menu planning?

14. Are any foods currently being purchased locally? \_\_\_ NO \_\_\_ YES  
If yes, fill in table below.

PRODUCT	WHEN	FROM WHERE	HOW USED (salad bar, frozen, taste tests, etc...)
carrots	when available	Black river produce	finger food and soup
Lettuce and tomatoes	September	Tom at Fiver Farm, Barre VT	Sandwich bar

15. Are your food service staff interested in buying more local produce? \_\_\_\_ NO \_\_\_\_ YES  
Why or why not?

16. Are there any special promotions/events offered through your food service? \_\_\_\_ NO \_\_\_\_ YES  
If yes, please list them. (ex: "nutrition education week", "5-a-day", "International Food Day", etc...)

17. How are these promotions and events advertised?

- School Newsletter
- Morning Announcements
- Online School Menu
- Mail home announcements
- Monthly Menu
- Other \_\_\_\_\_

18. Has your school tried any changes in the school food program in the past 2 years? \_\_\_\_ NO \_\_\_\_ YES  
If Yes, please describe the changes and how well they were received.

19. Please describe the relationship between the food service staff and the teaching staff? Is there currently any coordination?

20. Do students currently have input into the school food program,? \_\_\_\_ NO \_\_\_\_ YES  
If yes, what method of input? (surveys, conversation, student forum,, etc....)

21. What are your top 4 concerns about your school food system? (this would include breakfast, lunch, snacks, afterschool, bake sales, fundraisers, classroom events, etc...)

A.

B.

C.

D.

22. Do you have vending machines in your school?  NO  YES  
If yes, what is being vended, who is operating the vending, and who can buy the products and when?

23. Does your school offer ala carte options in the cafeteria?  NO  YES  
If yes, who operates it and who can buy the products and when?

24. Do you have a school store that sells food?  NO  YES  
If yes, who is operating it, who supplies the food, and when can food be purchased?

25. Please describe your cafeteria:  
Table shape \_\_\_\_\_ Number of tables \_\_\_\_\_ Cafeteria Capacity \_\_\_\_\_  
Is the cafeteria used for other school day activities?  NO  YES  
If yes, what purpose and does this limit food service in anyway?

26. Are there opportunities for parents to get involved in school-wide efforts?  NO  YES  
If yes, what are the current opportunities?

27. Please name at least 4 farms and /or agricultural resources in your town.

A.

B.

C.

D.

28. Please name 4 community resources in your town which could be utilized or could partner with a school farm/food/nutrition project.

A.

B.

C.

D.

29. Does your school have any relationship with other local schools or colleges? \_\_\_\_ NO \_\_\_\_ YES  
If yes, please describe.

30. Overall, why does your committee want technical assistance from Vermont FEED and what do you hope it will accomplish?

What questions do you have for Vermont FEED?