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| Triennial Assessment Tracking Form |
| Date of Assessment:       |
| Name of School/District/SAU:       |
| Nutrition Education Goal(s) | Notes | Goal Status (select one):CompletedPartially CompletedIn ProgressNot Completed(click on “Choose an item” to show the drop down menu) |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Nutrition Promotion Goal(s) |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Marketing of Foods in Schools/RCCIs Goal(s) |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Foods Sold to Students During the School Day Goal(s) |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Foods Provided but not Sold to Students During the School Day |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Physical Activity Goal(s) |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Other School-Based Activities that Promote School Wellness Goal(s) |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Wellness Policy Leadership/Accountability |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Wellness Committee Representation |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Notification of the Public |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |
| Assessment of Wellness Policy Implementation |  |  |
| 1.       |       | Choose an item. |
| 2.       |       | Choose an item. |
| 3.       |       | Choose an item. |
| 4.       |       | Choose an item. |
| 5.       |       | Choose an item. |

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