

# Healthy School Award Form:

School: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

School Board: \_\_\_\_\_

School Contact Name: \_\_\_\_\_

School Contact E-mail: \_\_\_\_\_

Principal/Vice Principal: \_\_\_\_\_

Principal/Vice Principal E-mail: \_\_\_\_\_

Principal/Vice Principal aware application submitted (Yes) (No)

Public Health Nurse: \_\_\_\_\_

Work with your public health nurse to complete this form and your Health-Related Topic(s) Checklist. Please complete by April 26, 2019 and submit by one of the following:

**In Person:** To your school's public health nurse

**Email to:** [healthyschools@durham.ca](mailto:healthyschools@durham.ca)

or

**Fax to:** Durham Region Health Department  
Healthy School Award  
(905) 666-6214

or

**Mail to:** Durham Region Health Department  
Healthy School Award  
605 Rossland Road East, P.O. Box 730  
Whitby, Ontario L1N 0B2