



Prevention and Wellness Academy of Ohio Participant Application

Q1

Contact information for person submitting the application (name, title/role, email, phone number, School district, and school building you are submitting for.) If chosen, this will be the person contacted about application acceptance and next steps, including identifying the district's team lead.

Name:
Title/Role:
Email:
Phone:
Number:
School District:
School:
Building:

Q2

What is your district's enrollment?

Q3

To participate in this academy, you will need to identify a team of at least five (minimum) personnel but up to seven personnel, this team should include at least one person in each of the following roles:

- School district administrator (e.g., assistant superintendent, principal, assistant principal, director of student services)
- Guidance counselor, school psychologist, school social worker, or other student support staff
- Teacher

Is your school/district willing to have a team in place by October 2022?

Q4

Does your school district participate in a student behavior survey?

Examples: OHYes, Youth Risk Behavior Survey (YRBS), Pride Survey



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Q5

If your school district does not participate in a student behavior survey, will your district commit to doing one of the surveys named in the above question and share results with the Academy?

Q6

Please briefly describe in 100 words or less why you want to participate in this academy:

Q7

There is a level of commitment needed to participate in the Prevention and Wellness Academy Needs Assessments. Have you read the commitment form?

Q8

Is your school district prepared to fulfill the commitments?

Q9

Is your Superintendent or lead district administrator (if not the person completing the application) prepared to sign off on the commitments?

Thank you for your application as a participant in the Prevention & Wellness Academy of Ohio. Approved applications will be announced to participants by EOB October 25th, 2022