

# Back in Whack for Teens Program Commitment Contract for Student – School Nurse

I, \_\_\_\_\_, the student, agree to the following conditions of participation in the *Back in Whack for Teens Program [BiW4Teens]*:

\_\_\_\_\_ I agree to watch all 27 *BiW4Teens* videos and complete session activities and exercises to the best of my abilities.

\_\_\_\_\_ I agree to give my parent(s) *Appendix B – Parent Support Pack* from the *BiW4Teens* workbook.

\_\_\_\_\_ I agree to communicate with my parent(s) about which sessions I have completed, what I am learning, which healthy habit goals I am working on, and how I am following my nutrition plan.

\_\_\_\_\_ I agree to visit the school nurse every 2 weeks during the implementation phase (working through program materials) of *BiW4Teens*.

\_\_\_\_\_ I agree to visit the school nurse once a month during the maintenance phase (follow healthy lifestyle and eating plan which was developed during the implementation phase) of *BiW4Teens*.

\_\_\_\_\_ I agree to follow maintenance phase of the program for a minimum of 4 months.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

I, \_\_\_\_\_, the school nurse, agree to provide respectful feedback, support, and encouragement to, the student. I agree to monitor your progress during the implementation phase (working through program materials) and maintenance phase (follow healthy lifestyle and eating plan which was developed during the implementation phase) of the *BiW4Teens* Program.

School Nurse Signature \_\_\_\_\_ Date \_\_\_\_\_