Maine Department of Health and Human Services
Maine Department of Education

2015 MIYHS
School Response Fax-Back Form

Principals: Please fill out this form in full and fax it to Pan Atlantic SMS Group toll-free at **1-866-422-0072** as your earliest convenience, but no later than **Tuesday, September 30, 2014**.

1. Check the appropriate box:
   - ☐ My school will be participating in the 2015 MIYHS → **Please sign 1A below & fill out Sections 2 thru 5**
   - ☐ My school will **not** be participating in the 2015 MIYHS → Reason: _____
   - ☐ It is not yet decided → When will a decision likely be made? _____

1A:

Signed: _____ Printed name: _____ Date: _____
Principal

2. Please fill in the information listed below:

School name: _____

School address: _____

Grade span of school: _____

Principal name: _____

Principal email: _____

3. Please circle the grade(s) in your school that will be participating in the 2015 MIYHS. *Please use "N/A" only when a particular grade is not part of your school.* **NOTE:** Only schools selected for the K/3 sample can participate in the K/3 module. However, 'volunteer' schools can participate in the 5/6 module if they choose (***please note, however, that 'volunteer' schools will not be able to receive a participation stipend***).

K/3 Module			
Kindergarten	Yes*	No	N/A
Grade 3	Yes*	No	N/A

5/6 Module			
Grade 5	Yes*	No	N/A
Grade 6	Yes	No	N/A

Middle School & High School Modules			
Grade 7	Yes	No	N/A
Grade 8	Yes	No	N/A
Grade 9	Yes	No	N/A
Grade 10	Yes	No	N/A
Grade 11	Yes	No	N/A
Grade 12	Yes	No	N/A

* **For grades K, 3, and 5 only:** Please provide the following information about your School Nurse so that we can send information about the survey to that person directly:

Name: _____ Phone: _____

Email: _____ Fax: _____

2015 MIYHS
School Response Fax-Back Form (continued)

4. Please provide the following information for the individual(s) who will be the **2015 MIYHS Coordinator(s)** for your school. 2015 MIYHS Coordinators must:

    1. Be available to speak with Pan Atlantic representatives regarding survey administration protocol,
    2. Read the 2015 MIYHS Survey Administration Manual and participate in a training review (online),
    3. Pick up survey materials at a designated location within your local area in January,
    4. Be responsible for training the teachers in your school on how to administer the survey, and
    5. Drop the completed surveys off at a designated regional site or return the surveys to Pan Atlantic SMS Group some other secure way.

**** PLEASE NOTE THAT UNLESS OTHERWISE REQUESTED AND SPECIFIED, THE SCHOOL NURSE WILL BE CONSIDERED THE MIYHS COORDINATOR FOR THE K/3 MODULE (AND THAT MODULE ONLY). ****

The person(s) listed below will be receiving additional information about the survey in the coming weeks and months.

The 2015 MIYHS Coordinator(s) for the 5/6, Middle School, and/or High School modules for your school is/are:

2015 MIYHS Coordinator #1 (required)

Name: _____ Title: _____

Email: _____ Phone: _____

Address: _____ Fax: _____

2015 MIYHS Coordinator #2 (optional)

Name: _____ Title: _____

Email: _____ Phone: _____

Address: _____ Fax: _____

5. Would you (as Principal) like to be copied on all future email communications regarding the 2015 MIYHS? (Check one response.)

    ☐ Yes
    ☐ No

You (as Principal) will receive a confirmation email within five business days of Pan Atlantic SMS Group's receipt of this form.

If you have any questions about the 2015 MIYHS, please contact:

Kristina Record with Pan Atlantic SMS Group at miyhs@panatlanticsmsgroup.com or 1-866-487-2810 (toll-free);
Stephen Corral with the Maine Substance Abuse and Mental Health Services at Stephen.Corral@maine.gov or 207-287-2964;
Jessie Meisner with the Maine Center for Disease Control & Prevention at Jessie.Meisner@maine.gov or 207-287-5084; or
Jean Zimmerman with the Maine Department of Education at Jean.Zimmerman@maine.gov or 207-624-6687.