



Bay of Plenty and Lakes District

Health Promoting Schools

Kia Piki Ake te Kete Hauora

School A - Health Promoting Schools Action & Evaluation Plan (Term X, XXXX – Term X, XXXX)

PRIORITY ISSUES <i>WHAT your top priorities are</i>	Priority 1.	Priority 2.	Priority 3.
RATIONALE: <i>WHY these are your priority issues? How was the issue identified? Identify contributing factors.</i>			
GOAL: <i>WHAT you ultimately want to achieve</i>			
SMART Objectives <i>What the programme/HPS inquiry intends to achieve</i>			



Bay of Plenty and Lakes District

Health Promoting Schools

Kia Piki Ake te Kete Hauora

Signed by Principal _____

Signed by HPS Leader _____

Signed by BoT _____

Signed by Student Rep _____