



Water Schools

Evaluation for teachers

We would be grateful for your time in completing this form **after** you have introduced the Water Schools Initiative.

Thank you for sharing your thoughts.

Date of form completion	
Duration of trialing the initiative	
Name of School	
Year group	

Please answer the following questions by ticking the appropriate box.

Evaluation	Rating			
Water Schools	1 None	2 Some	3 Most	4 All
1. Before the Water Schools initiative, how many of your pupils were only consuming water/milk at school?	☐	☐	☐	☐
2. How many of your pupils are now only consuming water/milk at school?	☐	☐	☐	☐
3. How many of your pupils have shown increased concentration/attention during school activities?	☐	☐	☐	☐
4. How many of your pupils refill their bottles with water once a day?	☐	☐	☐	☐
5. How many parents/carers have responded well to the Water Schools initiative?	☐	☐	☐	☐
6. How many children have shown an interest in being a Water Warrior?	☐	☐	☐	☐
7. Do you think this initiative should become part of the School Policy for student wellbeing?	Yes ☐		No ☐	
8. Please list any challenges you have experienced in encouraging pupils to consume more water.				
9. Optional: any other comments.				

Thank you for joining the Water Schools initiative and for completing this evaluation form.

Please return this to healthierlifestyles@somerset.gov.uk.

Your participation, comments and suggestions help the Healthier Lifestyle Team to improve health and wellbeing in Somerset.