

Program Year: _____ School District: _____

Facilitator: _____ School Name: _____
(Name & ID Code)

Thank you for becoming a Kickin' Asthma (KA) facilitator. Please use this form to organize, distribute, and collect the documents for program analysis and evaluation.

Program Documents

Please distribute and collect the documents listed below.

- Parent Permission/Pre-Questionnaire** (in packet)
Distribute and collect prior to lesson 1
- Student Pre-Assessment** (see [link](#))
Distribute and collect at the beginning of lesson 1
- Student Post-Assessment** (see [link](#))
Distribute and collect at the end of lesson 4
- End of Program Letter** (in packet)
Send home with student at the end of lesson 4
- Parent Permission/Post-Questionnaire** (in packet)
Distribute and collect 1 month after lesson 4 (if applicable)
- Student Program/Attendance Tracking Form** (see link for the [PDF](#) and [Excel](#) version)
Used at every lesson

Please reach out to your Asthma Management in Schools (AMS) technical support member with any questions or feel free to drop your question **here**.

Evaluation Documents: Submission (required)

Please enter the information for all documents listed through the links provided below or email the PDFs to your AMS technical support member.

- Please refer to your unique ID Facilitator ID Codes when entering the data.**
Your 9-digit unique IDs should be coded as follows: School ID + Facilitator ID + Student ID Registration data. (We will provide you with the School and Facilitator ID, and the Student ID can be found on the attendance form)
- Please see the links below to enter and submit the documents/questionnaires:**
 - Student Assessment (Pre and Post): [KA Pre/Post Assessment Data Entry](#)
 - Student Program/Attendance Tracking Form: [KA Student Attendance Tracking](#)
 - Facilitator Post-Training Evaluation: [Kickin' Asthma Post Facilitator Training Evaluation](#)

Date Submitted: _____

AMS Technical Assistant Contact

Name: _____ Email: _____ Phone: _____