



# Pond Cove School

GRADES K - FOUR  
12 Scott Dyer Road  
Cape Elizabeth, Maine 04107  
(207) 799-7339

Principal  
THOMAS EISMEIER

To: Cape Elizabeth School Board

From: Tom Eismeier, Principal, Pond Cove School

Subject: Wellness Grant

Date: October 4, 2011

I am writing to lend my support to the Wellness Committee's application for a 5-2-1-0! Let's Go grant to install a water fountain on the upper playground at Pond Cove School.

A good match for the Committee's goals of promoting exercise and reminding people about the importance of drinking water throughout the day, the fountain project will be a welcome addition to the playground and would be used by students, staff, and community members.



## Cape Elizabeth Facilities Department

# Memo

October 5, 2011

TO: Meredith Nadeau, Superintendent of Schools  
Cape Elizabeth Board of Education

From: Greg Marles, Director of Facilities

RE: 5-2-1-0 Let's Go!

We have reviewed a request from Paula Harris for a 5-2-1-0 Let's Go grant to have a new exterior drinking water fountain installed at Pond Cove Elementary School. The following information has been gathered during our review process.

The installation of a new stainless steel seasonal drinking water fountain does not kick in a site impact study plan review by the Cape Elizabeth Planning Board. No site impact has been noted by the installation of the drinking fountain.

Additionally, the location of the fountain would be directly outside of a water source of a restroom, thus allowing for a simplified installation of the water line.

The Facilities Department supports the 5-2-1-0 Let's Go grant for a new drinking water fountain in the amount of \$1,000.00

**Cape Elizabeth Facilities Department**  
345 Ocean House Road  
Cape Elizabeth, Maine 04107  
207-799-9574

Date: **October 6, 2011**  
School Name: **Pond Cove School**  
Address of School: **12 Scott Dyer Road  
Cape Elizabeth, Maine 04107**

Contact Person: **Paula Harris**  
E-mail: **pharris@capeelizabethschools.org**  
Phone: **207-799-7339**

Do you have a 5210 team in place? **YES xx** NO

What are the titles of the members of your team?  
**Classroom teachers - four**  
**School Nurse**  
**Principal**  
**Health Teacher**  
**PE Teacher**

Amount requesting (up to \$1,500): **\$1,000.00**

If awarded, check should be made out to (must be school or district or organization): **Cape Elizabeth School District**

**Project Description:**

1. Please indicate which of the following 5210 Ten Strategies for Success your project(s) will focus on; (you are required to address **at least two of the ten strategies**).
  - € Provide healthy choices for snacks and celebrations; limit unhealthy choices.
  - € Participate in local, state, or national initiatives that promote healthy eating and active living.
  - € Engage community partners to help support and promote healthy eating and active living at your site.
  - € **Partner with and educate families in adopting and maintaining a lifestyle that supports healthy eating and active living.**
  - € **Provide water and low fat milk; limit or eliminate sugary beverages.**
  - € Provide non-food rewards.
  - € Provide opportunities for children to get physical activity every day.
  - € Implement a staff wellness program that includes healthy eating and active living.

- € Collaborate with Food and Nutrition Programs to offer healthy food and beverage options.
- € Limit recreational screen time.

2. Describe your project idea. How will the project address the strategies you selected above? (*Refer to appendix A for recommended project ideas*).

**We would like to purchase and install a wall mounted concrete and stainless steel seasonal drinking water fountain for our playground. Our elementary school playground is utilized by our students and the community 7 days a week. Having available cold water to drink would encourage students, staff and community visitors to increase their intake of water during active play and time on the playground.**

**The community will be educated about the benefits of drinking more water and low fat milk as outlined by 5-2-1-0, and be made aware of our newly placed water fountain.**

3. How do you plan to accomplish the project? When will it be complete? Who will you partner with to complete it? (For example: parents, staff, local businesses or farmers, high school students, Cooperative Extension, etc).

**Our district facilities/maintenance department will purchase and contract for installation of this fountain. It will be available for students in Spring 2012.**

4. Please describe any new or strengthened school guidelines for staff/parent handbooks that will be produced as part of this mini-grant project. We recommend you use the sample policy language in Appendix B as a guide. Include how you plan to share the new guidelines with staff and parents.

5. How will the proposed project be included into the program day? How will it impact students on a daily basis?

**All students use this primary playground for two recesses daily. In addition, this playground is utilized for:**

- Before school supervised activity time**
- Motor breaks for selected student**
- Classroom reward for additional physical activity**
- Small groups or individuals with guidance counselor or social worker as a reward or opportunity to learn/demonstrate appropriate playground behavior**
- Cape Elizabeth Community Services extended daycare program after school physical activity and play**
- Community children when school is not in session**

6. How many of your students will be directly impacted by this project? (please circle your answer)

**All students XX**

Most students

Some students

7. How will the proposed project help create a healthier school environment for students and/or staff in the long term (how will it be sustainable)?

**This new installation of a concrete and stainless steel water fountain will be maintained by our facilities/maintenance department and be available to students, staff and community for many years.**

8. What will you spend the funds on? Please provide estimates of anticipated costs.

<i>Item</i>	<i>Amount</i>
<i>Wall mount drinking fountain</i>	<i>\$ 389.95</i>
<i>Freight</i>	<i>45.00</i>
<i>Materials</i>	<i>225.00</i>
<i>Labor</i>	<i>340.00</i>
<i>TOTAL</i>	<i>\$ 999.95</i>

*On behalf of our school , this signature represents our commitment to implement the 5210 Goes to School program, spend the mini-grant funds as stated above, and complete all mini-grant requirements as listed on the first page in a timely manner.*

\_\_\_\_\_  
*Signature of Administrator*

\_\_\_\_\_  
*Date*

*\*\*\*If you have never received funding from 5210 Goes to School in the past, please submit your school's W-9 form with this application. Submitting your W-9 is not a guarantee of funding but will expedite the paperwork if your application is funded.\*\*\**

Please return this form and your programs W-9 form to: