

Overview of Machine and Environment

Evaluator Name

Evaluator Email

Time Machine Evaluated

Type of Audit

Practice

Data Collection for

College / University Name (type "Not Applicable" if your institution is a high school)
Please make sure to write out the full name of the institution.

School Name (type "Not Applicable" if your institution is a college / university)
Please make sure to write out the full name of the K-12 school.

State

Type of Environment

Elementary School

Middle School

High School

Community / Technical College

Building Name

Primary Building Structure

Residential

Recreation Facility

Academic

Library

Student Union/
Activities Bldg

Office

Athle

Machine (Facility) ID from enumeration sheet (eight digits: building structure, vending type, location, audit number) - no spaces, commas,

Machine Accessibility

Vending machine and machine product accessibility

- Include recommended date / time to assess vending machines
- Include recommended amount of vending machines to be assessed

Primary and Secondary Schools:

- Select **Not Appropriately Accessible** if machine is on for $\geq 50\%$ of the school day.
- Select **Somewhat Appropriately Accessible** if machine is on for 25-50% of the school day.
- Select **Appropriately Accessible** if machine is on $\leq 25\%$ of the school day.

All Other Environments (Colleges / Universities, Worksites, etc.):

- Select **Not Appropriately Accessible** if $\geq 50\%$ of machine slots are empty by the end of the day (when building closes).
- Select **Somewhat Appropriately Accessible** if 25-50% of machine slots are empty by the end of the day (when building closes).
- Select **Appropriately Accessible** if $\leq 25\%$ of the machine slots are empty by the end of the day (when building closes).

Not Appropriately Accessible



Somewhat Appropriately Accessible



Appropriately Accessible

Total number of available vending slots

- Count the total number of vending slots in the machine.
- NOTE: some machines have numbers on the slot, but the numbers don't always match with the actual number of slots.

Product type(s) in the machine (Select all that apply)

Snack



Prepared food



Cold beverage



Hot beverage



Total number of occupied vending slots

- Count the number of vending slots containing a product

Availability of Snack / Food Items

Total number of different snack / food items available in machine

Note: Do not count the same item twice if it is from the same brand in the vending machine slots

Example:

2 different original Lays in 2 different vending machine slots = 1 item

2 different Lays flavors (original, BBQ) in 2 different vending machine slots = 2 items

Upload image taken of the front of the vending machine and record data at a separate time

Upload image taken of the back of the vending machine and record data at a separate time

Upload image taken of the side of the vending machine and record data at a separate time

Upload image taken of the other side of the vending machine and record data at a separate time

Please write the name, brand, size (oz), and price of each item.

	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6	Item 7
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Brand	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Size (oz)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Price	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please continue entering the table information.

	Item 10	Item 11	Item 12	Item 13	Item 14	Item 15	Item 16
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Brand	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Size (oz)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Price	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please continue entering the table information.

	Item 19	Item 20	Item 21	Item 22	Item 23	Item 24	Item 25
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Brand	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Size (oz)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Price	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please continue entering the table information.

	Item 28	Item 29	Item 30	Item 31	Item 32	Item 33	Item 34
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Brand	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Size (oz)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	Item 28	Item 29	Item 30	Item 31	Item 32	Item 33	It
Price	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	[

Snack / Food Item Assessment

1. Take multiple pictures of the vending machine that has been selected for this assessment. Make sure the pictures capture the name.
2. Enter the information of each item in the table below by looking up the corresponding items online. *Note: Make sure the size of the p*
3. Provide a score based on the following guidelines:

Snacks (Range 0-10)	
Nutrient	Healthfulness Criteria
Calories	≤200 calories per package
Saturated Fat	≤10% DV per package
Trans Fat	0% per package
Added Sugar	≤12.5g per package
Sodium	≤10% DV per package
Fiber	≥10% DV per package
Calcium	≥10% DV per package
Iron	≥10% DV per package
Potassium	≥10% DV per package
Vitamin D	≥10% DV per package

	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6	Item 7
≤200 calories per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≤10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
0% per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≤12.5g per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≤10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≥10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≥10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≥10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≥10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
≥10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Yes	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please continue entering the table information

	Item 10	Item 11	Item 12	Item 13	Item 14	Item 15	It
≤200 calories per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	[
≤10% DV per pkg	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	[

	Item 10	Item 11	Item 12	Item 13	Item 14	Item 15	It
0% per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤12.5g per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
Total Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[

Please continue entering the table information

	Item 19	Item 20	Item 21	Item 22	Item 23	Item 24	It
≤200 calories per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
0% per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤12.5g per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
Total Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[

Please continue entering the table information

	Item 28	Item 29	Item 30	Item 31	Item 32	Item 33	It
≤200 calories per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
0% per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤12.5g per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≤10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
≥10% DV per pkg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[
Total Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[

Availability of Beverage Items

Total number of different beverages items available in machine

Upload image taken of the front of the vending machine and record data at a separate time

Upload image taken of the back of the vending machine and record data at a separate time

Upload image taken of the side of the vending machine and record data at a separate time

Upload image taken of the other side of the vending machine and record data at a separate time

Upload image(s) of the beverage

Beverage Item Assessment

1. Take multiple pictures of the vending machine that has been selected for this assessment. Make sure the pictures capture the name.
2. Enter the information of each item in the table below
3. Provide a score based on the following guidelines:

Beverages (Range 0-2)	
Score	Healthfulness Criteria
0	- Sports drinks / life water / vitamin water (>50 calories per 8 fl. oz.) - Sugar sweetened beverages / energy drinks / coffee drinks / lemonade / iced tea / all other beverages (>10 calories per 8 fl. oz.)
1	- Non-100% fruit or vegetable juice - Milk / flavored milk / non-dairy milk alternatives (>150 calories per 8 fl. oz.) - Sugar sweetened beverages / energy drinks / coffee drinks / lemonade / iced tea / all other beverages (≤10 calories per 8 fl. oz.)
2	- Water / flavored water - 100% fruit or vegetable juice - Milk / flavored milk / non-dairy milk alternatives (≤150 calories per 8 fl. oz.)

Name

Brand

Size (fl oz.)

Pric

	Name	Brand	Size (fl oz.)	Price
Item #1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #11	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #12	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #13	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #14	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #15	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #16	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #17	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #18	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #19	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #20	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Continue recording the information from the table above.

	Name	Brand	Size (fl oz.)	Price
Item #21	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #22	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #23	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #24	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #25	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #26	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #27	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #28	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #29	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #30	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #31	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #32	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #33	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #34	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #35	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #36	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #37	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #38	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #39	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Item #40	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Product Pricing & Promotion Questions

Messaging

Examples:

- Nutrition information
- Product logos

The outside of the vending machine is promoting the products inside of the vending machine to be "good for you"



The outside of the vending machine is promoting the products inside the vending machine to have "bacon or other similar type products"



No message



Sustainability Messaging

Is there promotion of sustainability, which has the 3 pillars of social, economic, and environmental sustainability?

Note: Any of the 3 pillars can be addressed, a specific pillar is not necessary

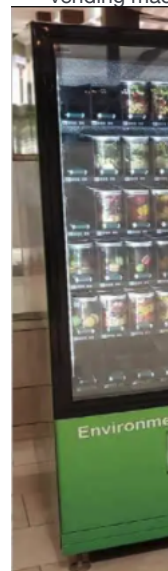
No sustainability promotion(s) on machine



General promotion(s) of sustainability on machine (i.e. general messaging of recycling/sustainability on machine like please recycle is applicable everywhere not to the specific machine)

Specific promotion(machine (i.e., prom





Comments for Questions 1 through 37

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