

# GETTING THROUGH THE SCHOOL DAY WITHOUT TOBACCO

## A NO TOBACCO USE AT SCHOOL PLAN FOR STUDENTS

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

| WHEN DO YOU HAVE CRAVINGS FOR TOBACCO?                                  | WHEN DO YOU USE TOBACCO AT SCHOOL?                                      |
|---|---|
| <input type="checkbox"/> before school                                  | <input type="checkbox"/> before school                                  |
| <input type="checkbox"/> during lunch                                   | <input type="checkbox"/> during lunch                                   |
| <input type="checkbox"/> after school                                   | <input type="checkbox"/> after school                                   |
| <input type="checkbox"/> with my friends: which one(s):<br>_____        | <input type="checkbox"/> with my friends: which one(s):<br>_____        |
| <input type="checkbox"/> during classes: which one(s)?<br>_____         | <input type="checkbox"/> during classes: which one(s)?<br>_____         |
| <input type="checkbox"/> when I am bored                                | <input type="checkbox"/> when I am bored                                |
| <input type="checkbox"/> during passing periods: which one(s)?<br>_____ | <input type="checkbox"/> during passing periods: which one(s)?<br>_____ |
| <input type="checkbox"/> other: _____                                   | <input type="checkbox"/> other: _____                                   |

### A. My plan:

- 1. Use Nicotine Replacement Therapy (NRT) during the school day: patch, gum or lozenges.**

The NRT must be stored in the nurse's office. You can get it from the nurse as needed/prescribed.

**2. Distract myself from cravings:**

- Keep my hands busy:
- Text a friend
  - Draw
  - Help a teacher grade/clean
  - Have a healthy snack or drink water
  - Listen to music
  - Take deep breaths
  - Go for a walk
  - Positive self-talk
  - Chew gum
  - Other \_\_\_\_\_
  - Other \_\_\_\_\_



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**3. I will change my routine:**

Hang out with friends who don't smoke during times when I usually smoke at school

Take a different route to classes

Not hang out in known smoking areas

Other \_\_\_\_\_

Other \_\_\_\_\_

**4. I will find support:**

Tell friends that I have decided not to use at school

Find a friend to talk to when I have a craving

Hang out with friends who don't smoke

Talk to a teacher or staff member who cares about me

Visit the school-based health center to get support

Other \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Nurse/Counselor Signature

