

Eating for a Stronger, Healthier You

Participant PRE-Survey

| Please answer the questions below before you | complete Eating for a Stronger, Healthier You experience. |
|-----------------------------------------------------|-----------------------------------------------------------|
| 1. What is your name? | |
| 2. What is today's date?// | |

- 3. What should you fill half your plate with when you eat a meal? Please circle the one best answer.
 - a. Fruits and vegetables
 - b. Grains (pasta, rice, bread)

MM DD YYYY

- c. Protein (meat, beans)
- d. Dairy
- e. None of the above.
- 4. How many servings of vegetables should you have each day? Please circle the one best answer.
 - a. 1
 - b. 2
 - c. 3
 - d. 4
 - e. 5
- 5. Please circle the option that best describes if you think you will complete each listed activity over the next month:

| a. Try a new fruit | No way I will do this! | I might do this | I will probably do this | I will definitely do this! |
|----------------------------------------------|---------------------------|-----------------|----------------------------|----------------------------------|
| b. Try a new vegetable | No way I will do this! | I might do this | I will probably do this | I will definitely do this! |
| c. Make a healthy snack or meal on my own | | | I will probably do this | I will definitely do this! |



Eating for a Stronger, Healthier You

Participant POST-Survey

| Please answer t | he auestions | below after u | iou comi | olete <i>Eatine</i> | a for a Stron | aer. Healthier | You experience. |
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| 1. \ | What is | your name? | |
|------|---------|------------|--|
| | | | |

- 2. What should you fill half your plate with when you eat a meal? Please circle the one best answer.
 - a. Fruits and vegetables
 - b. Grains (pasta, rice, bread)
 - c. Protein (meat, beans)
 - d. Dairy
 - e. None of the above.
- 3. How many servings of vegetables should you have each day? Please circle the one best answer.
 - a. 1
 - b. 2
 - c. 3
 - d. 4
 - e. 5
- 4. Please circle the option that best describes if you think you will complete each listed activity over the next month:

| a. Try a new fruit | No way I will do this! | I might do this | I will probably do this | I will definitely do this! |
|----------------------------------------------|---------------------------|-----------------|----------------------------|----------------------------------|
| b. Try a new vegetable | No wαy I will do this! | I might do this | I will probably do this | I will definitely do this! |
| c. Make a healthy snack or meal on my own | No way I will do this! | I might do this | I will probably do this | I will definitely do this! |

5. Please circle the option that best describes what you thought of today's educational experience.

