

# 9<sup>th</sup> - 12<sup>th</sup> GRADE NUTRITION EDUCATION SURVEY

STUDENT'S CODE NUMBER \_\_\_\_\_ DATE \_\_\_\_\_  PRE  POST

**DO NOT write your name on this survey.**

*The answers you give will be kept private. This survey is voluntary.*

**For each question, circle the answer that best describes you.**

**The first 4 questions ask about food you ate or drank.**

	0	1	2	3	4
<b>1. Yesterday, how many times did you eat vegetables, not counting French fries?</b> Include cooked vegetables, canned vegetables and salads. If you ate 2 different vegetables in a meal or snack, count them as 2 times.	None	1 time	2 times	3 times	4+ times
<b>2. Yesterday, how many times did you eat fruit, not counting juice?</b> Include fresh, frozen, canned, and dried fruits. If you ate 2 different fruits in a meal or snack, count them as 2 times.	None	1 time	2 times	3 times	4+ times
<b>3. Yesterday, how many times did you drink non-fat or 1% low fat milk?</b> Include low fat chocolate or flavored milk, and low fat milk on cereal.	None	1 time	2 times	3 times	4+ times
<b>4. Yesterday, how many times did you drink sweetened drinks like soda, fruit-flavored drinks, sports drinks, energy drinks and vitamin water?</b> Do not include 100% fruit juice.	None	1 time	2 times	3+ times	

**The next 2 questions ask about how often you choose certain foods.**

	1	2	3	4	5
<b>5. When you eat grain products, how often do you eat whole grains, like brown rice instead of white rice, whole grain bread instead of white bread, and whole grain cereals?</b>	Never	Once in a while	Sometimes	Most of the time	Always
<b>6. When you eat out at a restaurant or fast food place, how often do you make healthy choices when deciding what to eat?</b>	Never	Once in a while	Sometimes	Most of the time	Always

The next 3 questions are about physical activity.

	0	1	2	3	4	5	6	7
<b>7. During the past 7 days, how many days were you physically active for at least 1 hour?</b>	0 days	1 day	2 days	3 days	4 days	5 days	6 days	7 days

	1	2	3	4	5
<b>8. During the past 7 days, how often were you so active that your heart beat fast and you breathed hard most of the time?</b>	Never	1 time last week	2 times last week	3 times last week	4 or more times last week
<b>9. How many hours a day do you spend watching TV or movies, playing electronic games, or using a computer for something that is not school work?</b>	1 hour or less	2 hours	3 hours	4 hours	5 or more hours

The next 5 questions are about how you handle food.

	1	2	3	4	5
<b>10. How often do you wash your hands before preparing something to eat? Think about preparing snacks or meals.</b>	Never	Once in a while	Sometimes	Most of the time	Always
<b>11. How often do you wash vegetables and fruits before eating them?</b>	Never	Once in a while	Sometimes	Most of the time	Always
<b>12. When you take foods out of the refrigerator, how often do you put them back within 2 hours?</b>	Never	Once in a while	Sometimes	Most of the time	Always
<b>13. How often do you check the expiration date before eating or drinking foods?</b>	Never	Once in a while	Sometimes	Most of the time	Always

	0	1	2	3	4	5
<b>14. In the last month, if your family did not have enough food, how often did you help by going to a food pantry or finding other free or low-cost food resources?</b>	Does not apply	Never	1 time	2 times	3 times	4 or more times