

Student Name or ID: _____ Grade: _____ Date: _____ ☐ Pre ☐ Post

Please pick one answer for each question. Mark the bubble with your response.

1. How often do you eat fruits? *Include fresh, frozen, canned and dried fruits. Do not include juice.*

☐ 1 Not very often
 ☐ 2
 ☐ 3 Sometimes
 ☐ 4
 ☐ 5 Very often

2. How often do you eat vegetables? *Include cooked, frozen, canned, fresh vegetables, and salads. Do not include deep-fried vegetables (such as French fries).*

☐ 1 Not very often
 ☐ 2
 ☐ 3 Sometimes
 ☐ 4
 ☐ 5 Very often

3. How often do you drink sugary drinks like soda/pop, fruit-flavored drinks, sports drinks, energy drinks, and/or sweetened tea/coffee drinks? *Do not include 100% fruit juice or diet soda/pop.*

☐ 1 Not very often
 ☐ 2
 ☐ 3 Sometimes
 ☐ 4
 ☐ 5 Very often

4. When you have a choice, how often do you choose whole grains? *Like brown rice instead of white rice, whole grain bread instead of white bread, and whole grain cereals.*

☐ 1 Not very often
 ☐ 2
 ☐ 3 Sometimes
 ☐ 4
 ☐ 5 Very often
☐ 0 I do not have a choice

5. When you eat out at a restaurant or fast-food place or get take-out, how often do you make healthier choices when deciding what to eat or drink?

☐ 1 Not very often
 ☐ 2
 ☐ 3 Sometimes
 ☐ 4
 ☐ 5 Very often
☐ 0 I do not eat at those places

6. How often do you use the Nutrition Facts Label to compare packaged foods or drinks?

☐ 1 Not very often
 ☐ 2
 ☐ 3 Sometimes
 ☐ 4
 ☐ 5 Very often

7. In the past 7 days, how many days were you physically active enough that your heart beat fast and you were breathing hard most of the time?

☐ 0 0 days
☐ 1 1 days
☐ 2 2 days
☐ 3 3 days
☐ 4 4 days
☐ 5 5 days
☐ 6 6 days
☐ 7 7 days

8. During the past 7 days, on how many days did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?

☐ 0 0 days
☐ 1 1 days
☐ 2 2 days
☐ 3 3 days
☐ 4 4 days
☐ 5 5 days
☐ 6 6 days
☐ 7 7 days

6th - 12th Grade EFNEP Youth Questionnaire

Student Name or ID: _____ Grade: _____ Date: _____

☐ Pre ☐ Post

Please pick one answer for each question. Mark the bubble with your response.

9. How often do you make choices to include physical activity into your day? *Like walking or biking instead of getting a ride, doing a few minutes of exercise, choosing technology that involves physical activity, or moving actively in your home.*

①

Not very often

②

③

Sometimes

④

⑤

Very often

10. How often do you wash your hands with soap and running water for at least 20 seconds before making or eating food?

①

Not very often

②

③

Sometimes

④

⑤

Very often

11. How often do you wash fruits and vegetables before eating them?

①

Not very often

②

③

Sometimes

④

⑤

Very often

12. When making food, how often do you use separate cutting boards for raw meats and fresh produce? *Also count when you wash a single cutting board with warm, soapy water when switching between these foods.*

①

Not very often

②

③

Sometimes

④

⑤

Very often

⑥

I do not make my own food

13. When you take foods out of the refrigerator, how often do you put them back within 2 hours?

①

Not very often

②

③

Sometimes

④

⑤

Very often

14. How often do you compare prices of foods or drinks at the store before you buy them?

①

Not very often

②

③

Sometimes

④

⑤

Very often

⑥

I do not buy food

15. How often do you make your own snack or meal instead of purchasing one?

①

Not very often

②

③

Sometimes

④

⑤

Very often

⑥

I do not make my own food

For office use only

Group name: _____ Staff: _____

Location: _____