

Appendix G: School Foodservice Manager Interview and Survey

The School Foodservice Manager Interview for non-FFVP schools will differ only with the elimination of Part E for data collection in those schools. All other questions will be identical. The School Foodservice Staff Survey will be administered to the school foodservice manager or school foodservice lead in FFVP schools only.



School Foodservice Manager Interview – FFVP School

Date: _____

Interviewer Initials: _____

School ID#: _____

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Food and Nutrition Service, Office of Research and Analysis, 3101 Park Center Drive, Alexandria, VA 22302.

I would like to ask you some questions about the foods at your school. Most of the questions are to help us when we are describing the foods recorded by students on their food diaries. This interview should take about 10 minutes to complete. Before we begin, can I first get a copy of the lunch, breakfast and after school or other snack program menus, for yesterday, today and tomorrow AND the fresh fruit and vegetable program (FFVP) menus for this month and any past months that you may have on file for this school year? I may also need nutritional information about the school foods served yesterday, today or tomorrow.

A. About Interviewee(s) [Multiple foodservice staff may be needed to answer questions]

Current position	Name	Phone
<input type="checkbox"/> 1 School foodservice lead/manager		
<input type="checkbox"/> 2 District foodservice manager/director		
<input type="checkbox"/> 3 School FFVP lead/manager		
<input type="checkbox"/> 4 Other _____		

1. Where is school food prepared?

1 At school site **2** At central kitchen **3** Other (*write in*) _____

2. During this current school year, have you or any foodservice staff at your school engaged in the following activities to promote your school meals program? (Mark all that apply)

1 Attended a PTA or other parent group meeting to discuss the school food service program

2 Provided families with information about the school food service program

3 Invited family members to eat a school meal

4 Participated in a nutrition education activity in the classroom

5 Conducted a nutrition education activity in the food service area

6 Other promotional activities (*write in*) _____

B. School Lunch

Reference Day (student diary lunch): ₁ Yesterday ₂ Today

Now let's talk about the reimbursable items at lunch (yesterday/today). Please tell me about each item served – what it was, the portion size, how it was prepared or if packaged, and if it is a USDA commodity food. If it is a packaged food I want to look at the package for nutrient information. If it is a USDA recipe, I need the recipe number.

[*Record kcals for packaged food. Record recipe number for USDA food. Check box if commodity.]

1. Reimbursable LUNCH			
Item (Include brand name & product code)	Portion Size/ Package Wt	How Prepared or If Packaged	Nutrient Info/USDA recipe number*
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
Condiments available:			
Fluid milk, white (specify all types available): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	
Fluid milk, flavored (chocolate, strawberry) (specify all types available): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	

OVER

Now let's talk about the other foods sold a la carte at lunch (yesterday/today). Please tell me about each item served – what it was, the portion size, and how it was prepared or if packaged food. If it is a packaged food I want to look at the package for nutrient information if available.

[*Record kcals for packaged food. Write NONE in first row if no a la carte foods.]

2. A la Carte LUNCH			
Item (Include brand name & product code)	Portion Size/ Package Wt	How Prepared or If Packaged	Nutrient Info*
Condiments available:			
Fluid milk, white (<i>specify all types available</i>): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	
Fluid milk, flavored (chocolate, strawberry) (<i>specify all types available</i>): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	

OVER

C. School Breakfast

Reference Day (student diary breakfast): ₁ Today ₂ Tomorrow ₃ Not Provided by School

Now let's talk about the reimbursable items at breakfast (today/tomorrow). Please tell me about each item served – what it was, the portion size, how it was prepared or if packaged, and if it is a USDA commodity food. If it is a packaged food I want to look at the package for nutrient information. If it is a USDA recipe, I need the recipe number.

[*Record kcals for packaged food. Record recipe number for USDA food. Check box if commodity.]

1. Reimbursable BREAKFAST (Include brand name & product code)	Portion Size/ Package Wt	How Prepared or If Packaged	Nutrient Info/ USDA recipe number *
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
Condiments available:			
Fluid milk, white (<i>specify all types available</i>): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	
Fluid milk, flavored (chocolate, strawberry) (<i>specify all types available</i>): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	

OVER

Now let's talk about the other foods sold a la carte at breakfast (today/tomorrow). Please tell me about each item served – what it was, the portion size, and how it was prepared or if it was packaged. If it is a packaged food I want to look at the package for nutrient information if available.

[*Record kcals for packaged food. Write NONE in first row if no a la carte foods.]

2. A la Carte BREAKFAST			
Item (Include brand name & product code)	Portion Size/ Package Wt	How Prepared or If Packaged	Nutrient Info*
Condiments available:			
Fluid milk, white (<i>specify all types available</i>): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	
Fluid milk, flavored (chocolate, strawberry) (<i>specify all types available</i>): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	

OVER

D. School Snack (other than FFVP)

Reference Day (student diary snack): ₁ Today ₂ Tomorrow ₃ Not Provided by School

Now let's talk about the items served at snack (today/tomorrow) including any provided during school time and after-school (but not including FFVP). Please tell me about each item served – what it was, the portion size, how it was prepared or if it was packaged, and if it is a USDA commodity food. If it is a packaged food I want to look at the package for nutrient information if available. If it is a USDA recipe, I need the recipe number if available. [***Record kcals for packaged food. Record recipe number for USDA food. Check box if commodity. Write NONE in first row if no snack served.**]

1. In-School Snack			
Item (Include brand name & product code)	Portion Size/ Package Wt	How Prepared or If Packaged	Nutrient Info/ USDA recipe number *
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
Fluid milk, white (specify all types available): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	
Fluid milk, flavored (chocolate, strawberry) (specify all types available): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	

2. After-School Snack			
Item (Include brand name & product code)	Portion Size/ Package Wt	How Prepared or If Packaged	Nutrient Info/ USDA recipe number *
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
Fluid milk, white (specify all types available): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	
Fluid milk, flavored (chocolate, strawberry) (specify all types available): Whole <input type="checkbox"/> ₁ 2% <input type="checkbox"/> ₂ 1½% <input type="checkbox"/> ₃ 1% <input type="checkbox"/> ₄ ½% <input type="checkbox"/> ₅ Skim <input type="checkbox"/> ₆		Record color for each type of milk carton.	

E. Fresh Fruit and Vegetable Program (FFVP)

Reference Day (student diary snack): ₁ Yesterday ₂ Today ₃ Tomorrow

1. How long does it typically take to prepare FFVP each day (include preparation and clean-up) _____ minutes
2. How many servings of FFVP are prepared per day served? _____ count
3. Estimate the percent (between 0 and 100%) of the FFVP fruits and vegetables that you receive that goes to each of the following: (Note: should add to 100%)

FFVP Received	%
a. Discarded duration preparation	
b. Taken/consumed by students	
c. Leftover and discarded	
d. Leftover and used for other purposes	

4. If leftovers are used for other purposes (4d): What do you usually do with the leftovers used for other purposes? (Mark all that apply)
 - ₁ Serve at school breakfast
 - ₂ Serve at school lunch
 - ₃ Serve at both school breakfast and lunch
 - ₄ Other (write in) _____
5. If leftovers are discarded (4c) or used for other purposes (4d): What is the major reason that you have leftovers in the FFVP? (Mark all that apply)
 - ₁ Too much is ordered
 - ₂ Students don't take/like
 - ₃ Inadequate refrigeration or storage facilities
 - ₄ Other problems with perishability of fresh produce
 - ₅ Inadequate time/staff for produce preparation
 - ₆ Poor quality produce
 - ₇ Other (write in) _____

Last, let's talk about the FFVP (yesterday/today/tomorrow). Please tell me about each item served – what fruit or vegetable, the portion size, and how it was prepared.

6. FFVP Snack			
Fruit or Vegetable (s)	Portion Size	How Prepared (whole/sliced/peeled/ sectioned/pureed)	Condiment

SCHOOL FOODSERVICE STAFF SURVEY – FFVP SCHOOL

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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Your elementary school provides **free fresh fruits and vegetables** to students as snacks – separate from the school meal (breakfast or lunch). Below are statements or questions about the free fresh fruit and vegetable snack program (FFVP). Thinking about **this school year and the students at your school**, please mark only **one** response to each statement or question, unless instructed otherwise.

	<input type="checkbox"/> Agree Strongly	<input type="checkbox"/> Agree Somewhat	<input type="checkbox"/> Disagree Somewhat	<input type="checkbox"/> Disagree Strongly	<input type="checkbox"/> Don't know or does not apply
1. Students like the FFVP fruits .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
2. Students like the FFVP vegetables .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
3. I wish more students took the FFVP fruit .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
4. I wish more students took the FFVP vegetables .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
5. Students eat more fruits and vegetables at school on FFVP days.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
6. Students eat fewer unhealthy snacks at school on FFVP days.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
7. <i>If not offered daily</i> , the FFVP should be offered more days during the week .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
8. The FFVP should be offered more times a day .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
9. I wish the FFVP fruits were better quality .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
10. I wish the FFVP vegetables were better quality .	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
11. I think the variety of FFVP fruits is good.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
12. I think the variety of FFVP vegetables is good.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
13. We sometimes run out of FFVP produce and can't serve all of the children.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
14. I am satisfied with how we distribute FFVP produce to students.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
15. I think students benefit from the FFVP.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
16. I think the FFVP is NOT worth the effort it takes.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
17. My overall opinion of FFVP is favorable.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
18. I would like FFVP to continue in my school.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
19. If I could change one thing about the FFVP it would be: (Please write in)	_____				

20.	How much of the fruits provided in the FFVP do students usually eat?	<input type="checkbox"/> ₁ All or most (>75%)	<input type="checkbox"/> ₂ Much (50-75%)	<input type="checkbox"/> ₃ Some (25-49%)	<input type="checkbox"/> ₄ Little or none (<25%)	<input type="checkbox"/> ₅ Don't know
21.	How much of the vegetables provided in the FFVP do students usually eat?	<input type="checkbox"/> ₁ All or most (>75%)	<input type="checkbox"/> ₂ Much (50-75%)	<input type="checkbox"/> ₃ Some (25-49%)	<input type="checkbox"/> ₄ Little or none (<25%)	<input type="checkbox"/> ₅ Don't know
22.	Students eat less at school breakfast because of FFVP.	<input type="checkbox"/> ₁ All of the time	<input type="checkbox"/> ₂ Much of the time	<input type="checkbox"/> ₃ Some of the time	<input type="checkbox"/> ₄ Rarely or never	<input type="checkbox"/> ₅ Don't know
23.	Students eat less at school lunch because of FFVP.	<input type="checkbox"/> ₁ All of the time	<input type="checkbox"/> ₂ Much of the time	<input type="checkbox"/> ₃ Some of the time	<input type="checkbox"/> ₄ Rarely or never	<input type="checkbox"/> ₅ Don't know
24.	Has the FFVP changed the fruits or vegetables students take and eat at school lunch?	<input type="checkbox"/> ₁ No	<input type="checkbox"/> ₂ Yes, less fruits & veggies	<input type="checkbox"/> ₃ Yes, more fruits & veggies	<input type="checkbox"/> ₄ Different kinds of fruits & veggies	<input type="checkbox"/> ₅ Don't know
25.	Which 3 fruits do students like best in the FFVP? <i>(Please write in)</i>	_____	_____	_____		<input type="checkbox"/> ₁ Don't know
26.	Which 3 fruits do students like least in the FFVP? <i>(Please write in)</i>	_____	_____	_____		<input type="checkbox"/> ₁ Don't know
27.	Which 3 vegetables do students like best in the FFVP? <i>(Please write in)</i>	_____	_____	_____		<input type="checkbox"/> ₁ Don't know
28.	Which 3 vegetables do students like least in the FFVP? <i>(Please write in)</i>	_____	_____	_____		<input type="checkbox"/> ₁ Don't know
29.	During this current school year, has the FFVP been promoted by foodservice staff ?	Never	1 to 6 times a year	Monthly or Nearly Monthly	Weekly or Nearly Weekly	Daily or Nearly Daily
	a) Posters or displays	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	b) Fliers sent home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	c) Taste tests for students	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	d) Nutrition education classes/instruction to students	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	e) Verbal encouragement of students	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	f) Loudspeaker announcements	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	g) Information to teachers on fruits and vegetables	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	h) Other <i>(please write in)</i>	_____				

30.	Which of the following factors is a challenge of the FFVP?	Major Challenge	Minor Challenge	Not a Challenge	Don't Know
	a) Students don't like fruits and vegetables	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	b) Students waste too much	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	c) Messy to distribute and clean up	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	d) Inadequate foodservice staff training or information	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	e) Inadequate foodservice staff time	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	f) Class time interrupted or taken away from student learning	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	g) Students don't like to try new fruits and vegetables	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	h) Inadequate quality of FFVP produce	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	i) Inadequate variety of FFVP produce	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	j) Inadequate amounts of FFVP produce	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	k) Program requirements/regulations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	l) Perishability of FFVP produce	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	m) Inadequate kitchen facilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	n) Lack of storage space/facilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	o) Other (Please write in)	_____			
31.	Which of the following is a benefit of the FFVP?	Major Benefit	Minor Benefit	Not a Benefit	Don't Know
	a) Students eat more fruits and vegetables	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	b) Students are more willing to try new foods	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	c) Students learn about healthy foods	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	d) Students eat fewer unhealthy foods	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	e) Improved student behavior	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
	f) Other (Please write in)	_____			