OMB Control No: 0584-XXXX

Expiration date: XX/XX/XXXX

Parent Survey

This is not a test! There are no right or wrong answers. Your child’s elementary school provides free fruits and vegetables to students as snacks - separate from the school meal (breakfast or lunch).

Please think about this school year and please mark one answer [x]  for each question or statement below.

My child’s first name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My child’s last name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | My child **eats** the free fruit and vegetable snacks offered at school… | [ ] [ ] 1Rarely or never  | [ ] [ ] 2Some of the time | [ ] [ ] 3Most of the time | [ ] [ ] 4All of the time | [ ] [ ] [ ] 5Don’t know  |
|  | My child **likes** the free fruit and vegetable snacks offered at school… | [ ] [ ] 1Rarely or never  | [ ] [ ] 2Some of the time | [ ] [ ] 3Most of the time | [ ] [ ] 4All of the time | [ ] [ ] [ ] 5Don’t know  |
|  | My child **complains about the** **quality** of the free fruit and vegetable snacks offered at school…. | [ ] [ ] 1Rarely or never  | [ ] [ ] 2Some of the time | [ ] [ ] 3Most of the time | [ ] [ ] 4All of the time | [ ] [ ] [ ] 5Don’t know  |
|  |  My child gets **tired of the same kinds** of free fruit and vegetable snacks that are offered at school…. | [ ] [ ] 1Rarely or never  | [ ] [ ] 2Some of the time | [ ] [ ] 3Most of the time | [ ] [ ] 4All of the time | [ ] [ ] [ ] 5Don’t know  |
|  | How strongly do you agree or disagree with each of the following? |  |  |  |
|  | My child eats **more fruits and vegetables** since they have been offered as a free snack at school. | [ ] [ ] 1Agree Strongly | [ ] [ ] 2Agree Somewhat | [ ] [ ] 3Disagree Somewhat | [ ] [ ] 4Disagree Strongly | [ ] [ ] [ ] 5Don’t know  |
|  | My child eats **fewer unhealthy foods** on days when fruits and vegetables are offered as a free snack at school. | [ ] [ ] 1Agree Strongly | [ ] [ ] 2Agree Somewhat | [ ] [ ] 3Disagree Somewhat | [ ] [ ] 4Disagree Strongly | [ ] [ ] [ ] 5Don’t know  |
|  | My child has **asked** for fruits and vegetables at home **more often since** they have been offered as a as a free snack at school.  | [ ] [ ] 1Agree Strongly | [ ] [ ] 2Agree Somewhat | [ ] [ ] 3Disagree Somewhat | [ ] [ ] 4Disagree Strongly | [ ] [ ] [ ] 5Don’t know  |
|  | I **encourage my child** to eat the free fruit and vegetable snacks offered at school. | [ ] [ ] 1Agree Strongly | [ ] [ ] 2Agree Somewhat | [ ] [ ] 3Disagree Somewhat | [ ] [ ] 4Disagree Strongly | [ ] [ ] [ ] 5Don’t know  |
|  | I don’t like it when **teachers take time from class** to give out the free fruit and vegetable snacks to children. | [ ] [ ] 1Agree Strongly | [ ] [ ] 2Agree Somewhat | [ ] [ ] 3Disagree Somewhat | [ ] [ ] 4Disagree Strongly | [ ] [ ] [ ] 5Don’t know  |
|  | The fruit and vegetable snacks at school should be offered **more frequently.** | [ ] [ ] 1Agree Strongly | [ ] [ ] 2Agree Somewhat | [ ] [ ] 3Disagree Somewhat | [ ] [ ] 4Disagree Strongly | [ ] [ ] [ ] 5Don’t know  |
|  | **Overall**, I think the fruit and vegetable snack program at school is **good.** | [ ] [ ] 1Agree Strongly | [ ] [ ] 2Agree Somewhat | [ ] [ ] 3Disagree Somewhat | [ ] [ ] 4Disagree Strongly | [ ] [ ] [ ] 5Don’t know  |
| *According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control 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.* |
|  | **Spring only:** Has anything changed in the free fruit and vegetable snacks since January 1, 2015 That is, are the kinds or types of fruits and vegetables the same as were offered as snacks in the fall? | [ ] 1**Yes**  | [ ] 2**No** | [ ] 5**Don’t know**  |  |  |
|  | **Spring only:** If yes, what has changed in the free fruit and vegetable snack program?  Please mark all that apply.  |
|  | [ ] 1 Free snacks on more days of the week[ ] 2 Fresh fruits and vegetables less often [ ] No fresh fruit at all[ ] 3 No fresh vegetables at all [ ] 9 Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_l[ ] d Don’t know |  |  |  |  |  |
| 1. 14
 | **Spring only:** Which of the following types of fruit and vegetable snacks do you prefer for your child to be served in school? Do you prefer .... [ ] 1 Fresh fruit and vegetable snacks [ ] 2 Canned, frozen, or dried fruit and vegetable snacks[ ] 3 A mix of fresh, canned, frozen, or dried fruit and vegetable snacks [ ] 0 No preference  |
| Finally, a few questions about your child. |
|  | Has your child attended this school since the beginning of the current school year (2014-2015)? | [ ] 1Yes  | [ ] 2No |  |  |  |
|  | What does your child *usually* do for breakfast on school days? | [ ] 1Eats breakfast at home | [ ] 2Brings breakfast from home | [ ] 3Eats a school breakfast  | [ ] 4Eats breakfast someplace else | [ ] [ ] 5Does not eat breakfast  |
|  | What does your child *usually* do for lunch on school days? | [ ] 1Eats a school lunch | [ ] 2 | [ ] 3Other (include eats lunch at home)  | [ ] 4Eats lunch someplace else | [ ] [ ] 5Does not eat lunch  |
|  | Does your child receive free or reduced-price meals at school? | [ ] 1Yes, receives FREE meals | [ ] 2Yes, receives REDUCED PRICE meals | [ ] 3No | [ ] 4Don’t know |  |
|  | Is your child **Hispanic or Latino?** | [ ] 1Yes  | [ ] 2No |  |  |  |
|  | How would you describe your child? **Please mark all that apply.** | [ ] [ ] 1American Indian or Alaska native  | [ ] [ ] 2Asian | [ ] [ ] 3Black or African American | [ ] [ ] 4Native Hawaiian or Other Pacific Islander | [ ] [ ] [ ] 5White |

**Thank you for your help!**