

Name: _____ Date: _____ Site: _____

Program Operator Instructions: Please check off activities on page 1 as they are completed. When you are done with the theme, respond to questions on page 2 about all the activities.

Attachment I: Journal for Site Operators

OMB BURDEN STATEMENT: 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 control number. The valid OMB control number for this information collection is 0584-0524. The time to complete this information collection is estimated at 60 minutes, including time to complete and review the information collection.

Name: _____ Date: _____ Site: _____

Site Operator Instructions: Please check off activities on page 1 as they are completed. When you complete the theme, respond to questions on page 2 about all the activities.

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Summer Meals Summer Fun

Activities	Did you do the activity?	Time spent doing the activity.	Children's Response	Number of Attendees	The preparation and materials required for this activity were manageable?
Fruit and Veggie Rainbow	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	*Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Lights! Camera! Water!	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Fruit and Veggie Trivia	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Bring the Heat 2-Minute Challenge	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Water Sparklers	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Fruity Fun Chicken Salad Cups	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree

*Refers to Parents/Caregivers

Summer Meals Summer Fun (Continued)

Name: _____ Date: _____ Site: _____

Site Operator Instructions: Please check off activities on page 1 as they are completed. When you complete the theme, respond to questions on page 2 about all the activities.

Please describe any modifications or changes you made when			What changes would you make to improve these activities?		
Activities	Did you do the activity?	Time spent <i>doing</i> the activity.	Children's Response	Number of Attendees	The preparation and materials required for this activity were manageable?
Jump in for Healthy Choices	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	*Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Please describe the strengths of the activities.			Please describe the challenges of the activities.		
Water Balloon	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Relay Toss	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Hot Tomato	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Please describe your experiences with the recipe.			Thinking about all of the activities in this theme, what do you think children learned?		
Fruit and Veggie Waters	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Watermelon and Spinach Salad	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree

Splash into Summer Meals

*Refers to Parents/Caregivers

Name: _____ Date: _____ Site: _____

Site Operator Instructions: Please check off activities on page 1 as they are completed. When you complete the theme, respond to questions on page 2 about all the activities.

Splash into Summer Meals (Continued)

Please describe any modification you made when leading these activities.	What changes would you make to improve these activities?
Please describe the strengths of the activities.	Please describe the challenges of the activities.
Describe your experience with the Watermelon and Spinach Salad recipe .	Thinking about all of the activities in this theme, what do you think children learned ?

Movin' with Summer Meals

Activities	Did you do the activity?	Time spent doing the activity.	Children's Response	Number of Attendees	The preparation and materials required for this activity were manageable?
Red Pepper, Green Pepper, Chili Pepper	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	*Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Movie Moves Party Game	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Collaborative Poetry Slam	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Screen-Free Limbo Challenge	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Get Down with Bell Pepper	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Berry Jams Party Bites	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree

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Name: _____ Date: _____ Site: _____

Site Operator Instructions: Please check off activities on page 1 as they are completed. When you complete the theme, respond to questions on page 2 about all the activities.

Please describe any modification you made when leading these activities.	What changes would you make to improve these activities?
Please describe the strengths of the activities.	Please describe the challenges of the activities.
Describe your experience with the Berry Jams Party Bites recipe .	Thinking about all of the activities in this theme, what do you think children learned ?

Movin' With Summer Meals

Let's Celebrate Summer Meals

Activities	Did you do the activity?	Time spent doing the activity.	Children's Response	Number of Attendees	The preparation and materials required for this activity were manageable?
Cheer and Leap Game	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	*Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
My Party Plate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Play Hard Activity Cube	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Herb Tasting Party	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Herb Gardening	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Parade Day Bean Salad	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____ Children_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree

*Refers to Parents/Caregivers

Let's Celebrate Summer Meals (Continued)

Name: _____ Date: _____ Site: _____

Site Operator Instructions: Please check off activities on page 1 as they are completed. When you complete the theme, respond to questions on page 2 about all the activities.

Please describe any modification you made when leading these activities.			What changes would you make to improve these activities?		
Activities	Did you do the activity?	Time spent <i>doing</i> the activity.	Children's Response	Number of Attendees	The preparation and materials required for this activity were manageable?
Ultimate MyPlate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	*Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Please describe the strengths of the activities.			Please describe the challenges of the activities.		
Circle of Friends	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Cheer	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
That's What Friends Are For	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Describe your experience with the Parade Day Bean Salad recipe.			Thinking about all of the activities in this theme, what do you think children learned?		
Game Inventors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Melon Medley	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
Summer Vegetable Salsa	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min. <input type="checkbox"/> 10 - 15 min. <input type="checkbox"/> 16 - 20 min. <input type="checkbox"/> 21 - 25 min. <input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents _____ Children _____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree

*Refers to Parents/Caregivers

Summer Meals, Summer Friends (Continued)

<p>Please describe any modification you made when leading these activities.</p>	<p>What changes would you make to improve these activities?</p>
<p>Please describe the strengths of the activities.</p>	<p>Please describe the challenges of the activities.</p>
<p>Describe your experience with the Summer Vegetable Salsa recipe.</p>	<p>Thinking about all of the activities in this theme, what do you think children learned?</p>

Name: _____ Date: _____ Site: _____

Site Operator Instructions: Please check off activities on page 1 as they are completed. When you complete the theme, respond to questions on page 2 about all the activities.

Eat Smart to Play Hard

Activities	Did you do the activity?	Time spent doing the activity.	Children's Response	Number of Attendees	The preparation and materials required for this activity were manageable?
Power Up and Give Me 60!	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	*Parents_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
		<input type="checkbox"/> 10 - 15 min.		Children_____	
<input type="checkbox"/> 16 - 20 min.					
<input type="checkbox"/> 21 - 25 min.					
<input type="checkbox"/> over 25 min.					
Five Food Groups Relay Race	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
		<input type="checkbox"/> 10 - 15 min.		Children_____	
<input type="checkbox"/> 16 - 20 min.					
<input type="checkbox"/> 21 - 25 min.					
<input type="checkbox"/> over 25 min.					
Drink Smart to Play Hard	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
		<input type="checkbox"/> 10 - 15 min.		Children_____	
<input type="checkbox"/> 16 - 20 min.					
<input type="checkbox"/> 21 - 25 min.					
<input type="checkbox"/> over 25 min.					
Power Path	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
		<input type="checkbox"/> 10 - 15 min.		Children_____	
<input type="checkbox"/> 16 - 20 min.					
<input type="checkbox"/> 21 - 25 min.					
<input type="checkbox"/> over 25 min.					
Power Up Your Snack	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
		<input type="checkbox"/> 10 - 15 min.		Children_____	
<input type="checkbox"/> 16 - 20 min.					
<input type="checkbox"/> 21 - 25 min.					
<input type="checkbox"/> over 25 min.					
Garden Fiesta Tuna Pockets	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a lot <input type="checkbox"/> Enjoyed a little <input type="checkbox"/> Did not enjoy very much <input type="checkbox"/> Did not enjoy at all	Parents_____	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
		<input type="checkbox"/> 10 - 15 min.		Children_____	
<input type="checkbox"/> 16 - 20 min.					
<input type="checkbox"/> 21 - 25 min.					
<input type="checkbox"/> over 25 min.					

*Refers to Parents/Caregivers

Eat Smart to Play Hard (Continued)

Please describe any modification you made when leading these activities.	What changes would you make to improve these activities?
Please describe the strengths of the activities.	Please describe the challenges of the activities.
Describe your experience with the Garden Fiesta Tuna Pockets recipe .	Thinking about all of the activities in this theme, what do you think children learned ?