

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 for each question or statement below.

My child's first name: _____ My child's last name _____

1. My child eats the free fruit and vegetable snacks offered at school...	<input type="checkbox"/> ₁ Rarely or never	<input type="checkbox"/> ₂ Some of the time	<input type="checkbox"/> ₃ Most of the time	<input type="checkbox"/> ₄ All of the time	<input type="checkbox"/> ₅ Don't know
2. My child likes the free fruit and vegetable snacks offered at school...	<input type="checkbox"/> ₁ Rarely or never	<input type="checkbox"/> ₂ Some of the time	<input type="checkbox"/> ₃ Most of the time	<input type="checkbox"/> ₄ All of the time	<input type="checkbox"/> ₅ Don't know
3. My child complains about the quality of the free fruit and vegetable snacks offered at school....	<input type="checkbox"/> ₁ Rarely or never	<input type="checkbox"/> ₂ Some of the time	<input type="checkbox"/> ₃ Most of the time	<input type="checkbox"/> ₄ All of the time	<input type="checkbox"/> ₅ Don't know
4. My child gets tired of the same kinds of free fruit and vegetable snacks that are offered at school....	<input type="checkbox"/> ₁ Rarely or never	<input type="checkbox"/> ₂ Some of the time	<input type="checkbox"/> ₃ Most of the time	<input type="checkbox"/> ₄ All of the time	<input type="checkbox"/> ₅ Don't know

How strongly do you agree or disagree with each of the following?

5. My child eats more fruits and vegetables since they have been offered as a free snack at school.	<input type="checkbox"/> ₁ Agree Strongly	<input type="checkbox"/> ₂ Agree Somewhat	<input type="checkbox"/> ₃ Disagree Somewhat	<input type="checkbox"/> ₄ Disagree Strongly	<input type="checkbox"/> ₅ Don't know
6. My child eats fewer unhealthy foods on days when fruits and vegetables are offered as a free snack at school.	<input type="checkbox"/> ₁ Agree Strongly	<input type="checkbox"/> ₂ Agree Somewhat	<input type="checkbox"/> ₃ Disagree Somewhat	<input type="checkbox"/> ₄ Disagree Strongly	<input type="checkbox"/> ₅ Don't know
7. 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.	<input type="checkbox"/> ₁ Agree Strongly	<input type="checkbox"/> ₂ Agree Somewhat	<input type="checkbox"/> ₃ Disagree Somewhat	<input type="checkbox"/> ₄ Disagree Strongly	<input type="checkbox"/> ₅ Don't know
8. I encourage my child to eat the free fruit and vegetable snacks offered at school.	<input type="checkbox"/> ₁ Agree Strongly	<input type="checkbox"/> ₂ Agree Somewhat	<input type="checkbox"/> ₃ Disagree Somewhat	<input type="checkbox"/> ₄ Disagree Strongly	<input type="checkbox"/> ₅ Don't know
9. I don't like it when teachers take time from class to give out the free fruit and vegetable snacks to children.	<input type="checkbox"/> ₁ Agree Strongly	<input type="checkbox"/> ₂ Agree Somewhat	<input type="checkbox"/> ₃ Disagree Somewhat	<input type="checkbox"/> ₄ Disagree Strongly	<input type="checkbox"/> ₅ Don't know
10. The fruit and vegetable snacks at school should be offered more frequently .	<input type="checkbox"/> ₁ Agree Strongly	<input type="checkbox"/> ₂ Agree Somewhat	<input type="checkbox"/> ₃ Disagree Somewhat	<input type="checkbox"/> ₄ Disagree Strongly	<input type="checkbox"/> ₅ Don't know
11. Overall , I think the fruit and vegetable snack program at school is good .	<input type="checkbox"/> ₁ Agree Strongly	<input type="checkbox"/> ₂ Agree Somewhat	<input type="checkbox"/> ₃ Disagree Somewhat	<input type="checkbox"/> ₄ Disagree Strongly	<input type="checkbox"/> ₅ Don't know

Evaluation of the Canned, Frozen, or Dried Fruits and Vegetables Pilot Project in the FFVP
 Appendix E.2b1. SURVEY – PARENT (ENGLISH)

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.

12. 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?	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₂ No	<input type="checkbox"/> ₅ Don't know		
13. Spring only: If yes, what has changed in the free fruit and vegetable snack program? Please mark all that apply. <input type="checkbox"/> ₁ Free snacks on more days of the week <input type="checkbox"/> ₂ Fresh fruits and vegetables less often <input type="checkbox"/> No fresh fruit at all <input type="checkbox"/> ₃ No fresh vegetables at all <input type="checkbox"/> ₉ Other (specify) _____ <input type="checkbox"/> _d Don't know					
14. Spring only: Which of the following types of fruit and vegetable snacks do you prefer for your child to be served in school? 1 Do you prefer <input type="checkbox"/> ₁ Fresh fruit and vegetable snacks <input type="checkbox"/> ₂ Canned, frozen, or dried fruit and vegetable snacks <input type="checkbox"/> ₃ A mix of fresh, canned, frozen, or dried fruit and vegetable snacks <input type="checkbox"/> ₀ No preference					
Finally, a few questions about your child.					
15. Has your child attended this school since the beginning of the current school year (2014-2015)?	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₂ No			
16. What does your child usually do for breakfast on school days?	<input type="checkbox"/> ₁ Eats breakfast at home	<input type="checkbox"/> ₂ Brings breakfast from home	<input type="checkbox"/> ₃ Eats a school breakfast	<input type="checkbox"/> ₄ Eats breakfast someplace else	<input type="checkbox"/> ₅ Does not eat breakfast
17. What does your child usually do for lunch on school days?	<input type="checkbox"/> ₁ Eats a school lunch	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃ Other (include eats lunch at home)	<input type="checkbox"/> ₄ Eats lunch someplace else	<input type="checkbox"/> ₅ Does not eat lunch
18. Does your child receive free or reduced-price meals at school?	<input type="checkbox"/> ₁ Yes, receives FREE meals	<input type="checkbox"/> ₂ Yes, receives REDUCED PRICE meals	<input type="checkbox"/> ₃ No	<input type="checkbox"/> ₄ Don't know	
19. Is your child Hispanic or Latino ?	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₂ No			

Appendix E.2b1. SURVEY - PARENT (ENGLISH)

20. How would you describe your child? Please mark all that apply.	<input type="checkbox"/> ₁ American Indian or Alaska native	<input type="checkbox"/> ₂ Asian	<input type="checkbox"/> ₃ Black or African American	<input type="checkbox"/> ₄ Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> ₅ White
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Thank you for your help!