



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.

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**Attachment I: Journal for Site Operators**

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**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?
<b>Fruit and Veggie Rainbow</b>	<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
<b>Lights! Camera! Water!</b>	<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
<b>Fruit and Veggie Trivia</b>	<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
<b>Bring the Heat 2-Minute Challenge</b>	<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
<b>Water Sparklers</b>	<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
<b>Fruity Fun Chicken Salad Cups</b>	<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 <b>modifications or changes you made when</b>			What <b>changes</b> 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?
<b>Jump in for Healthy Choices</b>	<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 <b>strengths</b> of the activities.			Please describe the <b>challenges</b> of the activities.		
<b>Water Balloon</b>	<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
<b>Relay Toss</b>	<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
<b>Hot Tomato</b>	<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 experiences with the <b>Fruity Fun Chicken Salad</b> recipe.			Thinking about all of the activities in this theme, what do you think children learned?		
<b>Fruit and Veggie Waters</b>	<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
<b>Watermelon and Spinach Salad</b>	<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 <b>modification</b> you made when leading these activities.	What <b>changes</b> would you make to improve these activities?
Please describe the <b>strengths</b> of the activities.	Please describe the <b>challenges</b> of the activities.
Describe your experience with the <b>Watermelon and Spinach Salad recipe</b> .	Thinking about all of the activities in this theme, what do you think <b>children learned</b> ?

### 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?
<b>Red Pepper, Green Pepper, Chili Pepper</b>	<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
<b>Movie Moves Party Game</b>	<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
<b>Collaborative Poetry Slam</b>	<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
<b>Screen-Free Limbo Challenge</b>	<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
<b>Get Down with Bell Pepper</b>	<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
<b>Berry Jams Party Bites</b>	<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 <b>modification you made when leading</b> these activities.	What <b>changes would you make</b> to improve these activities?
Please describe the <b>strengths</b> of the activities.	Please describe the <b>challenges</b> of the activities.
Describe your experience with the <b>Berry Jams Party Bites</b> recipe.	Thinking about all of the activities in this theme, what do you think <b>children learned</b> ?

**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?
<b>Cheer and Leap Game</b>	<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
<b>My Party Plate</b>	<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
<b>Play Hard Activity Cube</b>	<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
<b>Herb Tasting Party</b>	<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
<b>Herb Gardening</b>	<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
<b>Parade Day Bean Salad</b>	<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 <b>modification</b> you made when leading these activities.			What <b>changes</b> 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?
<b>Ultimate MyPlate</b>	<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 <b>strengths</b> of the activities.			Please describe the <b>challenges</b> of the activities.		
<b>Circle of Friends</b>	<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
<b>Cheer</b>	<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
<b>That's What Friends Are For</b>	<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 <b>Parade Day Bean Salad recipe.</b>			Thinking about all of the activities in this theme, what do you <b>think children learned?</b>		
<b>Game Inventors</b>	<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
<b>Melon Medley</b>	<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
<b>Summer Vegetable Salsa</b>	<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 <b>modification</b> you made when leading these activities.</p>	<p>What <b>changes</b> would you make to improve these activities?</p>
<p>Please describe the <b>strengths</b> of the activities.</p>	<p>Please describe the <b>challenges</b> of the activities.</p>
<p>Describe your experience with the <b>Summer Vegetable Salsa recipe</b>.</p>	<p>Thinking about all of the activities in this theme, what do you think <b>children learned</b>?</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?
<b>Power Up and Give Me 60!</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a lot	*Parents_____	<input type="checkbox"/> Strongly Agree
		<input type="checkbox"/> 10 - 15 min.	<input type="checkbox"/> Enjoyed a little	Children_____	<input type="checkbox"/> Agree
<b>Five Food Groups Relay Race</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 16 - 20 min.	<input type="checkbox"/> Did not enjoy very much	Parents_____	<input type="checkbox"/> Disagree
		<input type="checkbox"/> 21 - 25 min.	<input type="checkbox"/> Did not enjoy at all	Children_____	<input type="checkbox"/> Strongly Disagree
<b>Drink Smart to Play Hard</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a lot	Parents_____	<input type="checkbox"/> Strongly Agree
		<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Enjoyed a little	Children_____	<input type="checkbox"/> Agree
<b>Power Path</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 10 - 15 min.	<input type="checkbox"/> Did not enjoy very much	Parents_____	<input type="checkbox"/> Disagree
		<input type="checkbox"/> 16 - 20 min.	<input type="checkbox"/> Did not enjoy at all	Children_____	<input type="checkbox"/> Strongly Disagree
<b>Power Up Your Snack</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 21 - 25 min.	<input type="checkbox"/> Enjoyed a lot	Parents_____	<input type="checkbox"/> Strongly Agree
		<input type="checkbox"/> over 25 min.	<input type="checkbox"/> Enjoyed a little	Children_____	<input type="checkbox"/> Agree
<b>Garden Fiesta Tuna Pockets</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 - 9 min.	<input type="checkbox"/> Did not enjoy very much	Parents_____	<input type="checkbox"/> Disagree
		<input type="checkbox"/> 10 - 15 min.	<input type="checkbox"/> Did not enjoy at all	Children_____	<input type="checkbox"/> Strongly Disagree

\*Refers to Parents/Caregivers

### Eat Smart to Play Hard (Continued)

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