**Attachment L –Child Taste Test Ballot: Instructions for Completing the Taste Test Ballots with Children, Taste Test Faces, Taste Test Records Sheet**

**OMB BURDEN STATEMENT**:  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 0584-0524. The time required to complete this information collection is estimated to average 2 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.

**Instructions for Completing the Taste Test Ballots with Children**

**When to do the taste tests:** Immediately after each recipe activity is completed with your students, have the students try the recipe and then ask **five children** to respond to the taste test ballot questions.

**Follow these instructions:**

1. Give children a chance to try the food.
2. Read the following aloud to five children in your classroom:

*I would like to know what you thought of the food we just tried. I’m going to ask each one of you some questions about the food.**There are no right or wrong answers. I just want to make sure children enjoy these foods, so you don’t have to worry about hurting my feelings.*

1. Approach each student individually, and read the following statement:

*I’m going to read a sentence and then you touch the face that shows how you feel about the food we just tried.*

1. Lay the laminated Taste Test Faces in front of the student and read the statements at the top of the table on the Taste Test Records Sheet aloud.
2. Mark children’s responses by circling which face they choose on the Taste Test Records Sheet.
3. Repeat with five children. Try to choose different children for each recipe.
4. Store all of the completed Records Sheets in the Taste Test Folder. Use a separate sheet for each recipe. Records sheets are marked with the names of the recipes.

**Taste Test Faces**

**Taste Test Record Sheet**

Insert recipe image

**Recipe:** [Insert Recipe Name]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **The food looked…** | **The food tasted…** | **The food smelled…** | **The food made me feel…** |
| **Child 1****Age: \_\_** |  |  |  |  |
| **Child 2****Age:\_\_\_**  |  |  |  |  |
| **Child 3****Age: \_\_\_** |  |  |  |  |
| **Child 4****Age:\_\_\_** |  |  |  |  |
| **Child 5****Age:\_\_\_** |  |  |  |  |