**Community Nutrition: Gardening Presentation**

**Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **TOPIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Age:** \_\_ 5 years and younger \_\_ 18 – 34 years \_\_ 65 years and older

\_\_ 6 – 17 years \_\_ 35 – 64 years

**Gender:** \_\_ Male \_\_ Female

**For each statement below circle the number based on this scale:**

**1 2 3 4 5**

    

Strongly Disagree Unsure Agree Strongly

Disagree Agree

1. I would recommend Community Nutrition to my family and friends **1 2 3 4 5**
2. Usually my health is good **1 2 3 4 5**
3. I am sure I can take care of my own health (T’áá hwó ájít’éego) **1 2 3 4 5**
4. The presenter/educator was knowledgeable about related gardening information **1 2 3 4 5**
5. How confident do you feel you will practice the gardening techniques from this

workshop at home? **1 2 3 4 5**

1. Because I have a garden/farm:

I eat more fruits and vegetables **1 2 3 4 5**

I spend less money on food **1 2 3 4 5**

I am more physically active **1 2 3 4 5**

1. What gardening practice, if any, do you intend to use as a result of what you have learned in this workshop? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments/Suggestions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**COMMUNITY NUTRITION STAFF ONLY**

Presenter’s Name: ­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facilitator’s Name: ­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_ Healthy Weight \_\_ Food Accessibility \_\_ Breastfeeding Rev. 03/7/17