

Date: October 28th, 2014

Location: _____

Name of Session: Healthy Tips for Halloween

For each statement below, please circle your answer.

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1.	Today's session was easy to understand.	1	2	3	4	5
2.	Today's session kept me interested.	1	2	3	4	5
3.	The skills and ideas I learned today were new to me.	1	2	3	4	5
4.	The skills and ideas I learned today will help me make healthy changes.	1	2	3	4	5
5.	The materials provided will help me make healthy changes.	1	2	3	4	5
6.	I would attend another nutrition education session.	1	2	3	4	5

		Poor	Below Average	Average	Good	Excellent
7.	Overall, I rate this session:	1	2	3	4	5

		Just Right	Too Short	Too Long
8.	The length of the session was:	1	2	3

9. What did you learn today that was new to you?

10. What is one thing that you plan to do to help you have a healthy Halloween?

11. Other comments: (All comments are welcome and very helpful!)

Thank you, we value your comments!
Please fax your comments back to 780-495-7338