

CREATE BETTER HEALTH HIGH SCHOOL

9th-12th Grade MID-SERIES Worksheet.



Please take a few minutes to answer the following questions. All responses are confidential, and there are no right or wrong answers to any questions in this survey. The information you provide will help us improve our program and be accountable to SNAP-Ed funders.

1. Write your initials, birth month (2-digit), and birth day (2-digit) below.

For example, if your name were John Doe and your birthdate were May 1, you would write:

First letter of first name: J First letter of last name: D Birth month: 05 Birth day: 01

First letter of first name: _____ First letter of last name: _____ Birth month: _____ Birth day: _____

2. What if anything, have you done to improve your eating habits since taking the Create Better Health class?

3. What if anything, have you done to improve your physical activity since taking the Create Better Health class?

4. Please select the following options that best represent you.

- | Gender | Age | Ethnicity | Race (select all that apply) |
|---|---|---|---|
| <input type="radio"/> Female | <input type="radio"/> 14-17 years | <input type="radio"/> Hispanic | <input type="radio"/> American Indian/Alaskan Native |
| <input type="radio"/> Male | <input type="radio"/> 18+ years | <input type="radio"/> Non-Hispanic | <input type="radio"/> Asian |
| <input type="radio"/> Non-binary | <input type="radio"/> Prefer not to respond | <input type="radio"/> Prefer not to respond | <input type="radio"/> Black/African American |
| <input type="radio"/> Prefer not to respond | | | <input type="radio"/> Native Hawaiian or other Pacific Islander |
| <input type="radio"/> Gender not listed | | | <input type="radio"/> White |
| | | | <input type="radio"/> Prefer not to respond |



For Office Use Only

Ambassador Name: _____ Lesson: _____

Location: _____

Extension

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