

CREATE HEALTHY GARDENS PRE SURVEY

Use at the beginning of the **first** class of a series in **FY 2025**.

CREATE
HEALTHY GARDENS

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 is your household size?

Number of adults (18 years or older) _____

Number of children (17 years or younger) _____

3. How many Create Better Health (SNAP-Ed) classes have you attended this year? (including this one)

- 1 2 3 4 5 6 7 8 or more

4. How long have you been gardening?

- This is my first time. 1-3 years 4-6 years 7-9 years 10+ years

For the following questions, consider what you have done during the past 30 days and select the best answer to describe what you typically do.

5. How many times a day do you eat fruit?

(Include fresh, frozen, dried and canned. Do not include juice.)

- I rarely eat fruit Less than 1 time a day (couple times a week) 1 time a day
 2 times a day 3 times a day 4 or more times a day

6. How many times a day do you eat vegetables?

(Include fresh, frozen, dried and canned. Do not count french fries or potato chips.)

- I rarely eat vegetables Less than 1 time a day (couple times a week) 1 time a day
 2 times a day 3 times a day 4 or more times a day

7. How many different kinds of vegetables do you usually eat a day?

- I rarely eat vegetables 1 kind a day 2 kinds a day 3 kinds a day
 4 or more kinds a day

8. How much do you agree or disagree with the following statements?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know what types of fruits and vegetables grow well in my community.	○	○	○	○	○
I feel confident I can plant a seed that will grow into a fruit or vegetable.	○	○	○	○	○
I know when a fruit or vegetable is ready to pick.	○	○	○	○	○
I know how to prepare garden fresh fruits or vegetables.	○	○	○	○	○
I enjoy gardening.	○	○	○	○	○
My family enjoys gardening (if applicable).	○	○	○	○	○

9. What do you hope to get out of attending Create Healthy Garden classes?

For Office Use Only

Ambassador Name: _____ **Lesson:** _____

Location: _____

