American Heart Association.

Double-Duty Meals

Participant PRE-Survey

Please answer the questions below ***before*** you complete the *Double-Duty Meals* experience.

1. What is your name? _____

2. What is today's date? _ _ / _ _ / _ _ _ _
   MM DD YYYY

3. Please circle the number that best represents your **current knowledge** of the topic below:

	Low		Medium		High	Not applicable
The benefits of meal preparation and planning	1	2	3	4	5	6
How to store different types of fresh fruit and vegetables	1	2	3	4	5	6

4. Please circle the number that best represents your **current confidence** that you can do the following:

	Not at all confident		Somewhat confident		Very Confident	Not applicable
Prepare one basic ingredient to use in two different meals	1	2	3	4	5	6
Double or triple a recipe	1	2	3	4	5	6
Store fruits and vegetables in the right place to make them last longer	1	2	3	4	5	6

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American Heart Association.

Double-Duty Meals

Participant POST-Survey

Please answer the questions below ***after*** you complete the *Double-Duty Meals* experience.

1. What is your name? _____

2. After participating in the *Double-Duty Meals* experience, please circle the number below that best represents your **current knowledge** of the topic below:

	Low		Medium		High	Not applicable
The benefits of meal preparation and planning	1	2	3	4	5	6
How to store different types of fresh fruit and vegetables	1	2	3	4	5	6

3. Please circle the number that best represents your **current confidence** that you can do the following:

	Not at all confident		Somewhat confident		Very Confident	Not applicable
Prepare one basic ingredient to use in two different meals	1	2	3	4	5	6
Double or triple a recipe	1	2	3	4	5	6
Store fruits and vegetables in the right place to make them last longer	1	2	3	4	5	6

4. Please rate the **quality of your overall experience** with *Double-Duty Meals*. Circle your choice below.

Poor	Below Average	Average	Above Average	Excellent	Undecided
1	2	3	4	5	6

5. How likely are you to **recommend** the *Double Duty Meals* experience to a friend, family member, or co-worker? Circle your choice below.

Extremely unlikely	Unlikely	Neutral	Likely	Extremely likely	Undecided
1	2	3	4	5	6

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