



NORTH DAKOTA

Food and Culture

A TASTE OF WORLD CUISINE

Participant Evaluation

County _____ Date _____

Please circle the letter(s) or number that corresponds to your answer.

1. Did you learn something new today? a. Yes b. No
2. What do you plan to do as a result of this lesson? (Circle all that apply)
 - a. Try foods from different cultures.
 - b. Try a new recipe from the "Food and Culture" collection.
 - c. Incorporate more ethnic foods into my menus.
 - d. Learn more about my family heritage.
 - e. Learn more about an unfamiliar culture. If so, which one? _____
 - f. Something else (please specify) _____
3. Will you share this information with family/friends? a. Yes b. No
4. Please rate your understanding of the information in the lesson (1 = poor; 5 = very good).
 1 2 3 4 5
5. Please rate how easy the handouts were to read and understand (1 = poor; 5 = very good).
 1 2 3 4 5
6. How old are you?
 - a. 18-25 d. 65-75
 - b. 26-40 e. 76-84
 - c. 41-64 f. 85 or older
7. Are you: a. Male b. Female
8. Do you live: a. Alone b. With others
9. What is your primary ethnic heritage (Norwegian, German, Irish, etc.)?
10. List other topics of interest to you in food/nutrition: