

# SNAP-Ed/EFNEP Behavioral Checklist

\_\_ Post



Name: \_\_\_\_\_ Date: \_\_\_\_\_

This is a survey about the ways you plan to fix foods for both yourself and your family. As you read each question, think about the last 2 months. If you live by yourself, answer the question for yourself only.

Please check the best answer to each question:	Do Not Do (1)	Seldom (2)	Sometimes (3)	Most of the time (4)	Almost Always (5)
1. How often do you plan meals ahead of time?					
2. How often do you compare prices before buying food?					
3. How often do you run out of food before the end of the month?					
4. How often do you shop with a grocery list?					
5. How often do you let meat or dairy foods sit out for more than 2 hours?					
6. How often do you thaw frozen foods at room temperature?					
7. When deciding what to feed your family, how often do you think about healthful food choices?					
8. How often do you prepare foods without adding salt?					
9. How often do you use the "Nutrition Facts" on the food label to make food choices?					
10. How often do your children eat something within 2 hours of waking?					

As a result of being in this class, what do you now receive:

- Free or Reduced School Lunches      Food from Food Pantries  
 Food Stamps      Head Start      TANF/Welfare  
 WIC      Other \_\_\_\_\_