

Name: _____ Today's Date _____ / _____ / _____
(month) (day) (year)

County: _____ Location: _____

Please check the descriptor that you identify with most:

Age: 18-59 years old >60 years old

Race: (If you identify as mixed-race, please check all that apply.)

- American Indian or Alaska Native Asian Black/African American
 Native Hawaiian or Pacific Islander White

Ethnic Group: Hispanic/Latino Non-Hispanic/Non-Latino

Gender: Male Female

Please answer all questions to the best of your ability:

1. On average, how many total cups (use your fist as a measure of a cup) of fruit do you eat each day? Count all that you eat whether in a combination dish or by itself.

- 0 cups 1/2 cup 1 cup 1½ cups 2 cups
 2½ cups 3 cups 3½ cups 4 or more cups

2. On average, how many total cups (use your fist as a measure of a cup) of vegetables do you eat each day? Count all that you eat whether in a combination dish or by itself.

- 0 cups 1/2 cup 1 cup 1½ cups 2 cups
 2½ cups 3 cups 3½ cups 4 or more cups

3. How often do you drink water (count tap, bottled, or sparkling water)?

- Never Once in a while Once each day Twice each day 3 or more times a day

4. How often do you drink sugar sweetened beverages (Include: regular soda, sweet tea, lemonade, and sports drinks)?

- Never Once in a while Once each day Twice each day 3 or more times a day

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5. How often do you use 1% milk, skim milk, and/or low-fat yogurt?

- Never Once in a while Once each day Twice each day 3 or more times a day

6. Do you eat more than one kind of fruit each day (i.e., apple, peach, berries, etc)?

- Never Seldom Sometimes Most of the time Almost always

7. Do you eat more than one kind of vegetable each day (i.e., carrots, corn, green beans, etc)?

- Never Seldom Sometimes Most of the time Almost always

8. How often do you use the "Nutrition Facts" on the food label to make food choices?

- Never Seldom Sometimes Most of the time Almost always

9. How often do you use MyPlate to make food choices?

- Never Seldom Sometimes Most of the time Almost always

10. How often do you eat whole grains (whole wheat bread, whole wheat tortillas, brown rice, oatmeal, etc) in place of white or enriched flour ones?

- Never Seldom Sometimes Most of the time Almost always

11. How often do you compare prices before you buy food?

- Never Seldom Sometimes Most of the time Almost always

12. How often do you shop with a grocery list?

- Never Seldom Sometimes Most of the time Almost always

13. How much physical activity (exercise) do you do in a day?

- 0-20 minutes 21-30 minutes 31-40 minutes
 41-60 minutes More than 60 minutes

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