



Dear Student,

Hello! We are CalFresh Healthy Living, University of California (UC). Our program teaches young people about healthy eating and physical activity habits. Our goal is to help students stay healthy. Our program is funded by USDA. The program is free to your school or community.

To find out how well our lessons work, we ask that you complete this survey. However, completing the survey is totally voluntary. *Voluntary* means you can agree or not agree to complete it. It is up to you. You may also skip questions you do not want to answer. But, we hope that you will answer all of them. Any information about who you are will be kept secret. We will not share your name or id number.

If you have any questions about the survey, just ask us!

Name of your local CalFresh Healthy Living, UC educator: \_\_\_\_\_

Phone number: \_\_\_\_\_

You may also contact our CalFresh Healthy Living, UC State Director: Kamaljeet Khaira, University of California at Davis, 1632 DaVinci Court, Room #31, Davis CA 95618 (530) 752-0555

If you have any concerns or complaints about our CalFresh Healthy Living, UC evaluation, you may also contact the Institutional Review Board, University of California at Davis at (916) 703-9151, from 8:00 a.m. to 5:00 p.m., Monday through Friday, or by writing to the Institutional Review Board, CTSC Bldg., Suite 1400, Rm. 1429, 2921 Stockton Blvd., Sacramento, California 95817.

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*This material was funded through a joint agreement among the USDA/FNS, CDSS CalFresh Healthy Living Section, UC Davis and the UC Cooperative Extension (UCCE). . These institutions are equal opportunity providers and employers. CalFresh Food provides assistance to low-income households and can help buy nutritious foods for better health. For information, call 1-877-847-3663.*

# YPAR Student Survey [BEFORE]

Program Site: \_\_\_\_\_ County: \_\_\_\_\_

Grade: 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> 10<sup>th</sup> 11<sup>th</sup> 12<sup>th</sup> Date: \_\_\_\_\_

ID#: \_\_\_\_\_

First letter of your <b>FIRST</b> name	First letter of your <b>LAST</b> name	Birth <b>MONTH</b>	Birth <b>DAY</b>
<b>A-Z</b>	<b>A-Z</b>	<b>01-12</b>	<b>01-31</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**1. I want to make a difference in making my school/ community a healthier place.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**2. I know where and how to gather useful data on making my school/community a healthier place.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**3. I can use research results to come up with solutions or recommendations for making my school/ community a healthier place.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**4. I can share research findings in a meaningful way to adults, decision makers or other policy makers in my school/community.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**5. I understand how my surroundings affect my health.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**6. I see myself as part of a youth community that can solve problems we are concerned about.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**7. Eating healthy is important to me.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**8. I feel confident in knowing what is healthy and not healthy to eat.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**9. I feel confident in knowing what is healthy and not healthy to drink.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**10. I select foods based on their nutritional value.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**11. The snacks I choose are often fruits or vegetables.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**14. I know how much physical activity\* I need to be healthy. (\*includes walking to school, sports, exercise, etc.)**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**12. I generally stay away from sugary drinks (soda, juice, energy and sport drinks).**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**15. I am physically active at least 60 minutes a day.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**13. Doing physical activity is important to me.**

- Yes, most definitely!
- Yes, probably
- Not sure
- No, probably not
- No, definitely not!

**16. When I choose a drink, I chose water over sugar sweetened beverages.**

- Yes, most definitely!
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- No, definitely not!

**Activities and Involvement** - Check all boxes that describe you:

- I have a job.
- I have had public recognition for my actions or work.
- I am involved in club sports.
- I am involved in extracurricular school activities (sports, band, drama, choir, cheer, school clubs, etc).
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# YPAR Student Survey [AFTER]

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<b>A-Z</b>	<b>A-Z</b>	<b>01-12</b>	<b>01-31</b>
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After participating in this project....	Now				
	Yes, definitely!	Yes, probably	Not sure	No really	Definitely not!
1. I have learned that I can make a difference in my community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I plan to continue making my community a more healthy place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I will be able to apply the skills learned to other issues I am passionate about.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Since being involved, I am more aware of healthy eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Since being involved in this project, I think I eat healthier.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I can influence others to eat healthier.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Since being involved, I am more aware of the importance of physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Since being involved in this project, I do more physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I can influence others on the importance of physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Since being involved in this project, I drink fewer sugar sweetened drinks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Since being involved in this project, I am more aware of clean drinking water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I can influence others on the importance of drinking water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p><b>One thing about this project that really stood out for me:</b></p>	<p><b>One thing I would like to change about this project:</b></p>
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- I have presented to groups other than a classroom.
- I have had public recognition for my actions or work.
- I am on the honor role at school.
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