**Name or Site:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **How helpful was the information provided in today’s workshop?**
a. Very helpful
b. Helpful
c. Kind-of helpful
d. Not helpful (explain)
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2. **On a scale from 1 to 10 how confident are you about your cooking skills after today’s workshop?** *(1=not confident, 10=very confident)*
\_\_\_\_\_\_\_
3. **How likely are you to try the discussed preservation methods after today?** **(CIRCLE)**
a. Very likely
b. Somewhat likely
c. Not likely (explain)
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4. **We would love your feedback! It will help us improve the next nutrition workshop!
*Anything you would have liked to learn that we didn’t cover? What did you enjoy?***
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**THANK YOU!**