

Introduction

Below are instructions on how to use this tool to receive student feedback about school meals.

1. This survey is to be distributed to students, ideally immediately following the meal of interest. Surveys are anonymous and should be collected in such a manner that ensures students' privacy.
2. Surveys can be conducted as often as you would like. It is highly recommended to survey students following the introduction of a new menu item or if a large amount of food is being thrown away.
3. Each question of the survey relates to a different part of the food service operation. This is meant to help program operators identify specific areas for improvement based on participant responses.

Questions #1, #2 and #3

MENU PLANNING

Questions #4 and #5

FOOD PREPARATION

Questions #6, #7 and #8

MEAL PRESENTATION

Questions #9 and #10

OVERALL

A Guide: How to Interpret Survey Results

Step 1: Assign each answer in all of the surveys that were collected with one of the following values based on the answer given:

Strongly Agree = 4	Agree = 3	Disagree = 2	Strongly Disagree = 1	No Answer = 0
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Step 2: Add all the answers to Question #1 from all the surveys collected.

Step 3: Count the total number of surveys that had an answer to Question #1 (do not include surveys in which there was no answer provided for Question #1).

Step 4: Divide the number from Step 2 by the number from Step 3 (Step 2 ÷ Step 3). The range this answer falls into represents the students' average answer to Question #1.

<u>Strongly Disagree</u>	<u>Disagree</u>	<u>Agree</u>	<u>Strongly Agree</u>
1.00 – 1.49	1.50 – 2.49	2.50 – 3.49	3.50 – 4.00

Step 5: Repeat Steps 2 – 4 for Questions #2 – #10.

Step 6: The open-ended questions at the end of the survey can provide valuable student insight into ways compliant menus and recipes may be improved upon.

Step 7: Visit the Boost Meal Appeal webpage on www.squaremeals.org for suggestions on how to improve the visual appeal and taste of school meals that comply with Federal standards.

Student Survey

School Name: _____

Date: _____

Meal Service (circle one): Breakfast OR Lunch

On average, how many days a week do you eat this meal in the school cafeteria?

1 2 3 4 5

Please circle the response that best represents your opinion of the following statements related to your dining experience

- | | | | | |
|---|----------------|-------|----------|-------------------|
| 1) There are multiple choices on the daily menu | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 2) There are multiple choices on the weekly menu | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 3) The flavors go well together | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 4) The food tastes good | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 5) The food is properly cooked | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 6) The food served looks fresh | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 7) The food smells good | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 8) The cafeteria staff are friendly | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 9) The food is consistently good | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 10) Overall, meals in the cafeteria are enjoyable | Strongly Agree | Agree | Disagree | Strongly Disagree |

Please list your top 5 reasons for eating school meals

_____ It's convenient

_____ My friends eat school meals

_____ The food is good

_____ I know what is being served

_____ I am hungry

_____ I get to try different foods

_____ The meal is balanced

_____ It's affordable

_____ I like the variety of menu items

_____ My parents or I can pay in advance

(write-in reason)

(write-in reason)

What did you like most about your meal today?

Is there anything that you did not like about your meal today?

How can we make your meal better?