



4-H Common Measures Survey

Dear Participant:

You have been given this survey because you have participated in a 4-H program or project and 4-H would like to learn about you and your experiences in 4-H.

Your answers are important and they will be kept private. But, if you don't want to fill out the survey, you don't have to or if there is a question you don't want to answer, you can leave it blank.

There are no right or wrong answers, so please answer all questions honestly.

Thank you for your help!

Healthy Eating Habits

1. **Do you pay attention to how much fruit you eat each day?**
 - Yes
 - Usually
 - Not really
 - No

2. **Do you pay attention to how many vegetables you eat each day?**
 - Yes
 - Usually
 - Not really
 - No

3. **Do you pay attention to how much water you drink each day?**
 - Yes
 - Usually
 - Not really
 - No

4. **Do you pay attention to how many sugary drinks you drink each day?**
 - Yes
 - Usually
 - Not really
 - No

5. **Do you pay attention to the food label for the food you eat?**
 - Yes
 - Usually
 - Not really
 - No

6. **How often do you eat breakfast?**
 - Every day
 - Most days
 - Some days
 - Never

7. **How often do you eat a meal with your family?**
 - Every day
 - Most days
 - Some days
 - Never



8. How often do you eat fast food?

- Every day
- Most days
- Some days
- Never

9. Have you given your family ideas for healthy meals or snacks?

- Yes
- Sort of
- No

10. At 4-H, did you learn about healthy food choices?

- Yes
- Sort of
- No

Being Active

11. Do you pay attention to how active you are each day?

- Yes
- Usually
- Not really
- No

12. Do you pay attention to how much time you spend in front of a screen (TV, computer, tablet, or smart phone)?

- Yes
- Usually
- Not really
- No

13. Do you get to decide how much time you spend in front of a screen (TV, computer, tablet, or smart phone)?

- Yes
- Usually
- Not really
- No

14. Have you encouraged others to be active with you?

- Yes
- Sort of
- No



15. At 4-H, did you talk about ways to be active?

- Yes
- Sort of
- No

Healthy Decision Making

16. What do you think about someone else texting and driving a car?

- It's okay
- It's usually okay
- It's usually not okay
- It's not okay

17. What do you think about someone else your age riding a bike and not wearing a helmet?

- It's okay
- It's usually okay
- It's usually not okay
- It's not okay

18. What do you think about someone else your age not wearing a seat belt?

- It's okay
- It's usually okay
- It's usually not okay
- It's not okay

19. What do you think about someone else your age drinking alcohol?

- It's okay
- It's usually okay
- It's usually not okay
- It's not okay

20. What do you think about someone else your age smoking?

- It's okay
- It's usually okay
- It's usually not okay
- It's not okay

21. What do you think about someone else your age taking drugs?

- It's okay
- It's usually okay
- It's usually not okay
- It's not okay



22. Do you encourage your friends to make responsible choices?

- Yes
- Usually
- Not really
- No

23. At 4-H, did you talk about risky behaviors?

- Yes
- Sort of
- No

Food Preparation Skills

24. Do you know how to follow a recipe to make something to eat?

- Yes
- Sort of
- No

25. Do you know how to make changes to a recipe?

- Yes
- Sort of
- No

26. Do you know how to use measuring cups and spoons?

- Yes
- Sort of
- No

27. Do you know how to use knives safely?

- Yes
- Sort of
- No

28. Do you know how to handle hot pots and pans safely?

- Yes
- Sort of
- No

29. Do you know how to keep your cooking area clean to stop spreading germs?

- Yes
- Sort of
- No



About You

30. How old are you?

years old

31. What grade are you in? *If it is summer break, which grade will you be starting in the fall?*

grade

32. Which of the following best describes your gender?

- Male (boy)
- Female (girl)
- I don't want to say

33. Which of the following best describes your race?

- Asian
- Black or African American
- Hispanic or Latino
- Native American
- Native Hawaiian/Other Pacific Islander
- White or Caucasian
- More than one race
- I don't know

34. How many hours do you typically spend on 4-H activities each week?

- Less than 1 hour
- 1 hour
- 2 hours
- 3 hours
- 4 hours
- 5 or more hours

35. Are you involved in 4-H at the county level?

- Yes
- No

36. Are you involved in 4-H at the state level?

- Yes
- No



37. Are you involved in 4-H at the national level?

- Yes
- No

38. Was this survey easy to complete?

- Yes
- Sort of
- No

39. Did you ask for help in completing this survey?

- Yes
- No

40. Why are you involved in 4-H?

41. What has been the most important thing you have learned by being involved in 4-H?

42. How might you be different if you had never been involved 4-H?

Thank you very much!
Please return this form as directed.

