Nourish   
Post-Program Questionnaire

Please take a moment to fill out the post-program survey for **Nourish***.* We greatly appreciate your thoughts about your experience.

**QUESTION RESPONSE (PLEASE CIRCLE BEST OPTION)**

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| I feel that the nutrition program was worthwhile and valuable. | Strongly Disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
| I am aware of foods I can choose that will enhance my wellbeing. | Strongly Disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
| I am confident in my ability to adjust what I eat to benefit my longevity. | Strongly Disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
| I believe that I enhanced my nutrition during this program. | Strongly Disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |

What did you like most about the **Nourish** program?

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What changes or additions would you recommend for the **Nourish** program?

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