

Taste Preference Survey for Elementary School Students

We are asking you to try a new food that we would like to add to our school lunch menu. Circle the smiley face that best describes how you feel about the food that you are tasting.

Food being tasted: _____ Date: _____

What do you think of the color/look of this item?



Good



Just Okay



Bad

What do you think of the taste/flavor of this item?



Good



Just Okay



Bad

What do you think of the smell of the item?



Good



Just Okay



Bad

Do you think we should serve this food on the lunch menu?



Yes



Maybe



No

Any Comments? _____
