



Lunch Survey for Parents

1. Do you review menu options with your child? Circle one.

Yes

Sometimes

No

2. Have you been to the cafeteria or eaten lunch at school with your child in the past six months? Circle one.

Yes

No

3. If you answered Yes to the previous question, please give the following rating: 10 is excellent, and 1 is terrible.

A. Overall cafeteria cleanliness: _____

B. Friendliness of cafeteria staff: _____

C. Overall look of the cafeteria: _____

D. Organization of the lunch line: _____

E. Overall presentation of the lunch food options: _____

4. How often does your child buy hot lunch? Circle one.

A. Every Day

C. 3-4 times a week

B. 1-2 times a week

D. Never

5. If you answered Never to the previous question, why? Circle all that apply.

A. Poor selection of hot food

D. Nutritional value

B. Quality of hot food

E. Other; please specify: _____

C. Cost

6. If you answered Never to the previous question, why? Circle all that apply.

A. Poor selection of hot food

D. Nutritional value

B. Quality of hot food

E. Other; please specify: _____

C. Cost

7. If you could add or remove anything on the lunch menu, what would you change and why? A long-form answer is encouraged.

8. How can we improve the overall lunch program experience for your child? A long-form answer is encouraged.

9. How long does your child typically take to finish a meal?

10. Are you willing to pay extra for healthy lunches for students? Circle one.

A. No

D. \$0.75 extra/meal

B. \$0.25 extra/meal

E. Other; please specify: _____

C. \$0.50 extra/meal

11. There are enough fruit juice offerings in the cafeteria. Circle one.

5 - Strongly Agree

2 - Disagree

4 - Agree

1 - Strongly Disagree

3 - No Opinion

12. How can we improve the overall lunch program experience for your child? A long-form answer is encouraged.

13. Are you interested in participating in your child's school lunch program? Circle one.

Yes

No

14. If you answered Yes to the previous question, do you have any relevant qualifications to help us improve the lunch program? For example, a degree in nutrition. Circle one.

Yes

No

15. Would you participate in a national Take Your Parents to Lunch Day? Circle one.

Yes

Maybe

No

16. If you answered No to the previous question, why not? A long-form answer is encouraged.

17. If your child has food allergies, do you feel they are accommodated in the cafeteria school lunch program? Circle one.

Yes

No

18. If you answered No to the previous question, why and how can we improve this? A long-form answer is encouraged.
