Tell us about YOU!!!
Teen: Simply Good Eating

Date: ______________________________
First Name: ____________________________
Middle Name: __________________________
Last Name: _____________________________
City: __________________ Zip: __________

Are you in 4-H? ___ Yes ___ No
Age? _____ Grade? ______

Where do you live? (✓ one)
_____ On a farm
_____ In a town or in the country
_____ In a city over 10,000 people
_____ In a city over 50,000 people
_____ In a suburb of a city

Ethnicity (✓ one):
_____ Hispanic or Latino
_____ Non-Hispanic and Non-Latino

Race (✓ all that apply):
_____ American Indian or Alaska Native
_____ Asian
_____ Black or African American
_____ Native Hawaiian or Pacific Islander
_____ White

Gender: _____ Male
_____ Female

Category (office use only): ___ I ___ II ___ III
CNE: __________________ Course #: __________________

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