



**Added Sugar Is Not So Sweet
Participant PRE-Survey**

Please answer the questions below *before* you complete the *Added Sugar Is Not So Sweet* experience.

1. What is your name? _____

2. What is today's date? ___/___/____
MM DD YYYY

3. Please circle the number that best represents your confidence that you can do the following:

	Not at all confident		Somewhat confident		Very Confident	Not applicable
Identify added sugar on food and beverage packaging	1	2	3	4	5	6
Prepare a snack, meal or dessert using alternatives to sugar	1	2	3	4	5	6
Replace sugary meals, snacks, and desserts with healthy, low-sugar options	1	2	3	4	5	6

4. Please circle the number that best represents your current knowledge of the topic below:

	Low		Medium		High	Not applicable
The American Heart Association's daily added sugar recommendation for men and women	1	2	3	4	5	6



**Added Sugar Is Not So Sweet
Participant POST-Survey**

Please answer the questions below **after** you complete the *Added Sugar Is Not So Sweet* experience.

1. What is your name? _____

2. After participating in the *Added Sugar Is Not So Sweet* experience, please circle the number below that best represents your **confidence** that you can do the following:

	Not at all confident	2	Somewhat confident	4	Very Confident	6 Not applicable
Identify added sugar on food and beverage packaging	1	2	3	4	5	6
Prepare a snack, meal or dessert using alternatives to sugar	1	2	3	4	5	6
Replace sugary meals, snacks, and desserts with healthy, low-sugar options	1	2	3	4	5	6

3. Please circle the number that best represents your **current knowledge** of the topic below:

	Low	2	Medium	4	High	6 Not applicable
The American Heart Association's daily sugar recommendation for men and women	1	2	3	4	5	6

4. Please rate the **quality of your overall experience** with the *Added Sugar Is Not So Sweet*. Circle your choice below.

Poor	Below Average	Average	Above Average	Excellent	Undecided
1	2	3	4	5	6

5. How likely are you to **recommend** the *Added Sugar Is Not So Sweet* experience to a friend, family member, or co-worker? Circle your choice below.

Extremely unlikely	Unlikely	Neutral	Likely	Extremely likely	Undecided
1	2	3	4	5	6