Taste Test Rating Sheet

Today I tried: __________________________________________

I liked this:

A lot!   Somewhat   Not very much

Comments on the look, taste, feel or smell of this food: ________
________________________________________________________
________________________________________________________

Today I tried: __________________________________________

I liked this:

A lot!   Somewhat   Not very much

Comments on the look, taste, feel or smell of this food: ________
________________________________________________________
________________________________________________________
What Part of the Plant Are You Eating?

Directions: Put one check mark next to your choice for each food listed.

1) Carrot
   ____ Root
   ____Leaf
   ____Seed

2) Celery Stick
   ____Leaf
   ____Stem
   _____Fruit

3) Apple
   ____Fruit
   ____Stem
   ____Root

4) Spinach
   ____ Stem
   _____Leaf
   _____Flower

5) Corn
   ____Root
   ____Fruit
   ____Seed

6) Broccoli
   ____Leaf
   ____Flower
   ____Stem
What Part of the Plant Are You Eating?

ANSWER SHEET

Directions: Put one check mark next to your choice for each food listed.

1) Carrot
   - Root
   - Leaf
   - Seed

2) Celery Stick
   - Leaf
   - Stem
   - Fruit

3) Apple
   - Fruit
   - Stem
   - Root

4) Spinach
   - Stem
   - Leaf

5) Corn
   - Root
   - Fruit
   - Seed

6) Broccoli
   - Leaf
   - Flower