

AIR FRYERS

EVALUATION FORM

We need your help in providing vital feedback on the program you have just completed. Please take a moment to complete this survey.

For each of the topics listed below, in the middle column, circle the one number that best reflects your level of understanding before the program. Then, in the right column, circle the one number that best reflects your level of understanding after the program.

LEVEL OF UNDERSTANDING

Level of Understanding or Ability	BEFORE the Program				AFTER the Program			
1. I know what an air fryer is and how it works.	1	2	3	4	1	2	3	4
2. I know the pros and cons of buying an air fryer.	1	2	3	4	1	2	3	4
3. I know how to use and maintain an air fryer.	1	2	3	4	1	2	3	4

INTENTIONS

For the following behaviors, check the box that describes what you plan to do as a result of the program.

Behavior Change	Yes	No
4. I will buy an air fryer.		
5. I will use an air fryer for making healthier recipes.		

SATISFACTION

For the following behaviors, check the box that describes what you plan to do as a result of the program.

Behavior Change	Strongly disagree	Disagree	Agree	Strongly Agree
6. The subject matter was timely for me.				
7. The information was practical to me.				
8. The demonstration reinforced the information.				
9. Overall, this was a very educational program.				

What is the most important thing from this program you will apply to your life?

Please provide any additional information.