

Informed Consent Statement

To: The Magic of Slow Cooker One-Pot Meals lesson participants

This slow cooker lesson is being taught to Family and Community Education study groups in several counties. The OSU Extension Service asks you to fill out this evaluation form so that we can assess the impact that the lesson may have had on you.

The completed forms will be forwarded to OSU by the county Extension office. Your responses, together with others, will be combined and used for statistical summaries only.

A summary of the findings will be included in the 2003 Extension Family and Community Development program's annual report that will be shared with OSU Extension administrators. This information may also be included in reports on Extension accomplishments. You're welcome to see the results if you like.

Your participation in this evaluation study is **VOLUNTARY**. You may choose not to participate. You are free to answer only those questions that you feel comfortable answering.

The responses that you provide will be kept **CONFIDENTIAL**. No one will know whose responses are whose. Only the county name will be on the form. Please be sure **NOT** to put your name or any identifying marks on the evaluation form.

There are no foreseeable risks associated with your participation in this study. Your feedback will help the OSU Extension Service to provide lessons that meet your needs.

If you have questions about the survey, contact me at (541) 682-4243. If I am not available, please leave a message so that I can call you back.

If you have questions about your rights as a human research subject, please contact the Institutional Review Board Coordinator in the OSU Research Office at (541) 737-3437.

Sincerely,



Susan Busler,
Extension FCD Faculty

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The Magic of Slow Cooker One-Pot Meals Lesson Evaluation

County _____ Date: _____

We'd like to know more about how your participation in this lesson has affected you. Please take a few minutes to answer these questions.

1. To what extent did the lesson increase your awareness/knowledge about the following?
(Circle one for each)

	Not at all			A lot	
• Basic slow cooker techniques	1	2	3	4	5
• Different kinds of slow cookers on the market	1	2	3	4	5
• Food safety tips when using a slow cooker	1	2	3	4	5
• How to adapt recipes to slow cookers	1	2	3	4	5

2. Do you own a slow cooker? Yes No
 If no, do you plan to purchase one? Yes No Not Sure

3. As a result of attending this lesson, you may have changed some of your ideas or behaviors. Which of the following did you do regularly **before** the lesson?

BEFORE THE LESSON (Check one box for each item.)	DID REGULARLY	DIDN'T DO REGULARLY	DIDN'T DO
Used my slow cooker			
Refrigerate leftovers promptly			
Use my slow cooker for other recipes besides soups and stews			

Which will you do regularly **after** this lesson?

AFTER THE LESSON (Check one box for each item.)	WILL DO REGULARLY	WON'T DO REGULARLY	WON'T DO
Use my slow cooker			
Refrigerate leftovers promptly			
Use my slow cooker for other recipes besides soups and stews			

4. Are there other things you plan to do differently after today's lesson? (Please use back.)

Please give this completed form to your leader/teacher, who will return it to the Extension Office.
Thank you.