Go Green: Growing and Enjoying Leafy Greens

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 or knowledge of the following? Please circle the number of your response.

<table>
<thead>
<tr>
<th>Area</th>
<th>Very Much</th>
<th>Very Little</th>
</tr>
</thead>
<tbody>
<tr>
<td>The benefits of nitric oxide for health</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Ways to increase nitric oxide production in the body</td>
<td>5</td>
<td>4</td>
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<tr>
<td>Different varieties of leafy green vegetables</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Methods for growing leafy greens in containers</td>
<td>5</td>
<td>4</td>
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<tr>
<td>Ways to prepare leafy greens in the kitchen</td>
<td>5</td>
<td>4</td>
</tr>
</tbody>
</table>

2. As a result of attending this lesson, you may change some of your ideas or behaviors. Please check the boxes of the actions you plan to take as a result of this lesson:

☐ Try a “new” leafy green vegetable
☐ Do two things that will increase my body’s production of nitric oxide
☐ Visit a favorite grocery store and see which types of greens they sell
☐ Eat leafy greens at least once a week
☐ Eat leafy greens at least once a month
☐ Make a green smoothie
☐ Make a pesto using leafy greens
☐ Massage kale
☐ Make kale chips
☐ Plant greens in containers
☐ Plant greens in a winter garden
☐ Plant greens in a summer garden
☐ Other (please describe)_________________________ ____________________________

3. Are there any other things you plan to do differently after today’s lesson? (Please write on the back of this page.)

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

Extension staff: please forward to Debra Minar Driscoll, P.O. Box 640, Dallas OR 97338.