**PSSC #0 ITC—Food Groups**

**OFFICE NOTE: SEE FAMILY RECORD FORM FOR DEMOGRAPHICS**



 NAME TODAY’S DATE

 Yes

 No

1. **During the past week, did you eat foods**

**from all 5 food groups each day?**

 Same as before

 More often

1. **Within the next week, how often will you eat**

**foods from all 5 food groups each day?**

**Please share with us how this workshop will help you and your family:**

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**PSSC #0 ITC--** **GRUPOS DE ALIMENTOS**

**OFFICE NOTE: SEE FAMILY RECORD FORM FOR DEMOGRAPHICS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Nombre** |  | **Fecha De Hoy** |  |  |

**** Sí

**** No

1. **¿Durante la última semana, comió usted alimentos**

**de todos los 5 grupos de alimentos cada día?**

**** Lo mismo que antes

**** Más que antes

1. **¿En la próxima semana, con qué frecuencia comerá**

**usted alimentos de todos los 5 grupos de alimentos cada**

**día?**

Por favor comparta con nosotros como esta clase le ayudará a usted y su familia:

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La política de la Universidad se propone concordar con las disposiciones de las leyes estatales y federales procedentes. Las preguntas sobre las políticas de igualdad de oportunidades de empleo de UC ANR pueden dirigirse a: Linda Marie Manton, Affirmative Action Contact and Title IX Officer, University of California, Agriculture and Natural Resources, 2801 Second Street, Davis, CA 95618, (530) 750-1318. Correo electrónico: Email: lmmanton@ucanr.edu. Website: http://ucanr.edu/sites/anrstaff/Diversity/Affirmative\_Action/. Este material fue financiado por el Programa de Asistencia de Nutrición Suplementaria del USDA-SNAP. El USDA es un proveedor y empleador de igualdad de oportunidades.

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