



## **Evaluation Form**

FACS Teacher Name(s):
Name of School:
Mailing Address:
Date of Beef Lesson in Classroom:
List of Beef Cuts Used: Recipe Prepared:
List of Ways in Which Beef Was Prepared:
Please Indicate Yes or No. In your beef unit did you address: Beef SelectionBeef PreparationBeef StorageBeef NutritionFood Safety
What materials provided by NYBIC were used in your beef unit:
Total Number of Classes Participating in Beef Lesson
Total Number of Students Participating in Beef Lesson
As a result of participating in this lesson, how likely do you feel your students are to purchase and prepare beef on their own:
Very LikelySomewhat LikelySomewhat UnlikelyVery Unlikely
If the New York Beef Industry Council were unable to continue the Beef for the Classroom program, would you stil be able to offer an equivalent beef lesson to your students?
YesNo
Comments: Please share your experience, comments and suggestions:
Please complete on-line. Or mail or fax completed application to: Cindy Chan Phillips, RD, MS, MBA

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