Sample Student Lunch Survey

Below is a sample survey developed by one of the SLM districts. It can used as is, or it can be modified to better meet the needs of the school site.

Welcome to the [Name of School District] Student Lunch Survey!

The purpose of this survey is to help us improve your school lunchroom. Please complete the survey before [set deadline] and return it to [designated, clearly indicated location and/or person] in your school's lunchroom.

Please remember:

1. This survey is anonymous. Do NOT write your name on the survey.

2. This survey is voluntary. You do not have to fill out the survey if you do not want to. You can skip questions or quit taking the survey at any time.

Please answer as accurately and honestly as possible. Thank you for your feedback!

Please circle the grade you are in:

6th	7th	8th	9th	10th	11th	12th

Please circle your gender: Male   Female

Please answer the following questions by checking the appropriate boxes:

Last week, how many days did you …	1 Day	2 Days	3 Days	4 Days	5 Days	0 Days
… buy a lunch from school?	☐	☐	☐	☐	☐	☐
… buy a snack item from the cafeteria?	☐	☐	☐	☐	☐	☐
… bring a lunch from home?	☐	☐	☐	☐	☐	☐
… skip lunch?	☐	☐	☐	☐	☐	☐

Please rate the following:

Food	Great	Good	Okay	Bad	I Don't Know
Taste of the cafeteria lunch	☐	☐	☐	☐	☐
Freshness of the cafeteria lunch	☐	☐	☐	☐	☐
Healthiness of the cafeteria lunch	☐	☐	☐	☐	☐
Look of the cafeteria lunch	☐	☐	☐	☐	☐

Atmosphere	Great	Good	Okay	Bad	I Don't Know
Friendliness of the cafeteria workers	☐	☐	☐	☐	☐
Cleanliness of the cafeteria	☐	☐	☐	☐	☐
Look of the cafeteria	☐	☐	☐	☐	☐
Organization of the lunch line	☐	☐	☐	☐	☐

1. Did you buy a school lunch today? Please circle your answer.

   Yes   No

   If yes, how well did you enjoy your school lunch today? Please circle your answer.

   Very Much   Somewhat   Not at All

Thank you for completing this survey.