



### ILLINOIS MIGRANT AND SEASONAL HEAD START PROJECT NUTRITION QUESTIONNAIRE

18 Months to 7 Years

Child's Name \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_\_  
 Person Interviewed \_\_\_\_\_ Date \_\_\_\_\_ Relationship \_\_\_\_\_  
 Name of Interviewer \_\_\_\_\_ Title \_\_\_\_\_

#### DIETARY HABITS

1. What food does your child especially like? \_\_\_\_\_
2. What type of milk does your child drink? \_\_\_\_\_
3. Are there any foods your child strongly dislikes? \_\_\_\_\_
4. Does your child take vitamins and mineral supplements? Yes \_\_\_ No \_\_\_  
 a. If "yes" what kind are they? \_\_\_\_\_  
 b. Do they contain iron? Yes \_\_\_ No \_\_\_  
 c. Were they prescribed? Yes \_\_\_ No \_\_\_  
 d. Do they contain fluoride? Yes \_\_\_ No \_\_\_
5. Is there any food your child should not eat for medical reasons? Yes \_\_\_ No \_\_\_  
 If so, what? \_\_\_\_\_
6. Is your child on a special diet prescribed by a doctor or nutritionist? Yes \_\_\_ No \_\_\_  
 If "yes" what kind? \_\_\_\_\_
7. Has there been a big change in your child's appetite in the last month? Yes \_\_\_ No \_\_\_
8. If "yes" how? \_\_\_\_\_
9. Does your child take a bottle? Yes \_\_\_ No \_\_\_
10. Does your child have trouble chewing or swallowing? Yes \_\_\_ No \_\_\_
11. Do you have any concerns about what your child eats? Yes \_\_\_ No \_\_\_  
 (e.g. too little, too much or types of foods, etc.) Explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

#### NUTRITION ASSESSMENT

(For office use only)

Growth  
 Date \_\_\_\_\_ Age \_\_\_\_\_ Yrs. \_\_\_\_\_ Mo. \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_

Anemia Screening Date \_\_\_\_\_ Hemoglobin \_\_\_\_\_ or Hematocrit \_\_\_\_\_  
 Re-Screening Date \_\_\_\_\_ Hemoglobin \_\_\_\_\_ or Hematocrit \_\_\_\_\_

Nutritionist's recommendations \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Nutritionist Signature \_\_\_\_\_ Date \_\_\_\_\_

(When assessment is completed, fill out parent notification of "Nutrition Screening Results" form and give one to parent(s) and file one copy in child's health file.)














































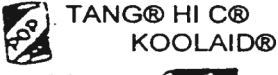

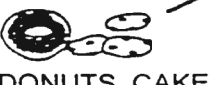



# NUTRITION QUESTIONNAIRE

## 18 MONTHS TO 7 YEARS

Name of Child \_\_\_\_\_

1. Circle all the foods this child eats or drinks

2. Next, Circle the best answer

<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">   <b>MILK</b> (any kind)         </div> <div style="text-align: center;">   <b>CHEESE</b> (except cream or cottage cheese)         </div> <div style="text-align: center;">   <b>YOGURT</b> </div> </div>	<p style="text-align: center;"><b>Dairy</b></p> <p>1. This child eats some of these foods:</p> <ol style="list-style-type: none"> <li>2 times or less a day</li> <li>3 or 4 times a day</li> <li>more than 4 times a day</li> </ol>
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">   <b>MEAT &amp; POULTRY</b> (any kind)         </div> <div style="text-align: center;">   <b>EGGS</b> </div> <div style="text-align: center;">   <b>COTTAGE CHEESE</b> </div> <div style="text-align: center;">   <b>PEANUT BUTTER</b> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>BEANS</b> (not green)         </div> <div style="text-align: center;">   <b>FISH</b> </div> </div>	<p style="text-align: center;"><b>Protein</b></p> <p>2. This child eats some of these foods:</p> <ol style="list-style-type: none"> <li>Less than 2 times a day</li> <li>2 or more times a day</li> </ol>
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">   <b>CEREAL</b> (any kind)         </div> <div style="text-align: center;">   <b>RICE</b> </div> <div style="text-align: center;">   <b>CRACKERS</b> </div> <div style="text-align: center;">   <b>NOODLES, SPAGHETTI</b> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>BREAD</b> </div> <div style="text-align: center;">   <b>TORTILLAS</b> </div> </div>	<p style="text-align: center;"><b>Grains</b></p> <p>3. This child eats some of these foods:</p> <ol style="list-style-type: none"> <li>less than 4 times a day</li> <li>5 to 6 times a day</li> <li>7 or more times a day</li> </ol>
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">   <b>KIWI</b> </div> <div style="text-align: center;">   <b>GRAPEFRUIT</b> (or juice)         </div> <div style="text-align: center;">   <b>CABBAGE</b> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>ORANGE</b> (or juice)         </div> <div style="text-align: center;">   <b>STRAWBERRIES</b> </div> <div style="text-align: center;">   <b>TOMATO</b> (or juice)         </div> <div style="text-align: center;">   <b>BROCCOLI</b> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>GREEN PEPPER</b> </div> </div>	<p style="text-align: center;"><b>Vitamin C Source</b></p> <p>4. This child eats some of these foods:</p> <ol style="list-style-type: none"> <li>less than once a day</li> <li>1 or more times a day</li> </ol>
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">   <b>CANTALOUPE</b> </div> <div style="text-align: center;">   <b>PUMPKIN</b> </div> <div style="text-align: center;">   <b>CARROTS</b> </div> <div style="text-align: center;">   <b>PAPAYA</b> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>DARK LEAFY GREENS</b> (spinach, romaine lettuce, mustard greens, etc.)         </div> <div style="text-align: center;">   <b>APRICOTS</b> </div> <div style="text-align: center;">   <b>SQUASH</b> </div> </div> <div style="text-align: center; margin-top: 10px;">   <b>YAMS (or sweet potatoes)</b> </div>	<p style="text-align: center;"><b>Vitamin A Source</b></p> <p>5. This child eats some of these foods:</p> <ol style="list-style-type: none"> <li>less than 3 times a week</li> <li>3 to 4 times a week</li> <li>1 or more times a day</li> </ol>
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">   <b>APPLES</b> </div> <div style="text-align: center;">   <b>PEACHES</b> </div> <div style="text-align: center;">   <b>POTATOES</b> (white)         </div> <div style="text-align: center;">   <b>LETTUCE</b> (iceberg)         </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>GREEN BEANS</b> </div> <div style="text-align: center;">   <b>PEARS</b> </div> <div style="text-align: center;">   <b>SQUASH (zucchini)</b> </div> <div style="text-align: center;">   <b>PEAS</b> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>BANANAS</b> </div> <div style="text-align: center;">   <b>CORN</b> </div> </div>	<p style="text-align: center;"><b>Other Fruits or Vegetables</b></p> <p>6. This child eats some of these foods:</p> <ol style="list-style-type: none"> <li>less than 2 times a day</li> <li>2 or more times a day</li> </ol>
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;">   <b>CANDY</b> </div> <div style="text-align: center;">   <b>CHIPS</b> </div> <div style="text-align: center;">   <b>TANG® HI C® KOOLAID®</b> </div> <div style="text-align: center;">   <b>SODA</b> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">   <b>DONUTS, CAKE PIES, COOKIES</b> </div> <div style="text-align: center;">   <b>JELLO®</b> </div> <div style="text-align: center;">   <b>POPSICLES</b> </div> <div style="text-align: center;">   <b>SUGARY CEREALS</b> </div> </div>	<p style="text-align: center;"><b>Other Foods</b></p> <p>7. This child eats some of these foods:</p> <ol style="list-style-type: none"> <li>1 or more times a day</li> <li>4 to 6 times a week</li> <li>2 to 3 times a week</li> <li>1 or less times a week</li> </ol>