

Unit 3: Fruits and Vegetables

Fruits and Veggies for your family



Health experts recommend 2 cups of fruit and 2-3 cups of veggies a day. The nutrients in fruits and vegetables, like vitamins, minerals, and fiber, can help keep you healthy. Are your family's favorite fruits and vegetables in your kitchen? Students, use the "student" column to mark the fruits and vegetables on the checklist you have eaten in the past week. Interview your parent and use the "parent" column to mark the fruits and vegetables your parent has eaten in the past week.

STUDENT	PARENT	FRUIT/VEGETABLE
<input type="checkbox"/>	<input type="checkbox"/>	Apples
<input type="checkbox"/>	<input type="checkbox"/>	Apricots
<input type="checkbox"/>	<input type="checkbox"/>	Asparagus
<input type="checkbox"/>	<input type="checkbox"/>	Avocado
<input type="checkbox"/>	<input type="checkbox"/>	Bananas
<input type="checkbox"/>	<input type="checkbox"/>	Beans or lentils
<input type="checkbox"/>	<input type="checkbox"/>	Beets
<input type="checkbox"/>	<input type="checkbox"/>	Bell peppers (red, green, or yellow)
<input type="checkbox"/>	<input type="checkbox"/>	Blueberries
<input type="checkbox"/>	<input type="checkbox"/>	Bok choy
<input type="checkbox"/>	<input type="checkbox"/>	Broccoli
<input type="checkbox"/>	<input type="checkbox"/>	Cabbage
<input type="checkbox"/>	<input type="checkbox"/>	Carrots
<input type="checkbox"/>	<input type="checkbox"/>	Cauliflower
<input type="checkbox"/>	<input type="checkbox"/>	Celery
<input type="checkbox"/>	<input type="checkbox"/>	Cherries
<input type="checkbox"/>	<input type="checkbox"/>	Corn
<input type="checkbox"/>	<input type="checkbox"/>	Cucumbers
<input type="checkbox"/>	<input type="checkbox"/>	Eggplant
<input type="checkbox"/>	<input type="checkbox"/>	Grapefruit
<input type="checkbox"/>	<input type="checkbox"/>	Grapes
<input type="checkbox"/>	<input type="checkbox"/>	Greens (turnip, collard, kale, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Green beans
<input type="checkbox"/>	<input type="checkbox"/>	Guava
<input type="checkbox"/>	<input type="checkbox"/>	Kiwi

STUDENT	PARENT	FRUIT/VEGETABLE
<input type="checkbox"/>	<input type="checkbox"/>	Lettuce
<input type="checkbox"/>	<input type="checkbox"/>	Mangos
<input type="checkbox"/>	<input type="checkbox"/>	Melon (watermelon, cantaloupe, or honeydew)
<input type="checkbox"/>	<input type="checkbox"/>	Mushrooms
<input type="checkbox"/>	<input type="checkbox"/>	Oranges
<input type="checkbox"/>	<input type="checkbox"/>	Papaya
<input type="checkbox"/>	<input type="checkbox"/>	Peaches
<input type="checkbox"/>	<input type="checkbox"/>	Peas
<input type="checkbox"/>	<input type="checkbox"/>	Pears
<input type="checkbox"/>	<input type="checkbox"/>	Pineapple
<input type="checkbox"/>	<input type="checkbox"/>	Plums
<input type="checkbox"/>	<input type="checkbox"/>	Potatoes (not including French fries)
<input type="checkbox"/>	<input type="checkbox"/>	Raisins
<input type="checkbox"/>	<input type="checkbox"/>	Spinach
<input type="checkbox"/>	<input type="checkbox"/>	Squash (butternut, pumpkin summer)
<input type="checkbox"/>	<input type="checkbox"/>	Strawberries
<input type="checkbox"/>	<input type="checkbox"/>	Sweet potatoes/ Yams
<input type="checkbox"/>	<input type="checkbox"/>	Tangerines
<input type="checkbox"/>	<input type="checkbox"/>	Tomatoes
<input type="checkbox"/>	<input type="checkbox"/>	Tofu/soy beans (edamame)
<input type="checkbox"/>	<input type="checkbox"/>	Zucchini
<input type="checkbox"/>	<input type="checkbox"/>	Pineapple
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____



Students, answer these questions about fruits and vegetables.

What is your favorite fruit? _____

Do you have this fruit in your house right now? Yes No (circle one)

What is your favorite vegetable? _____

Do you have this vegetable in your house right now? Yes No (circle one)

About how often do you eat a serving of fruit?
(One serving is about the size of your fist.)

_____ times per day

About how often do you eat a serving of vegetables?
(One serving is about the size of your fist for most vegetables, and about the size of a cereal bowl for salad.)

_____ times per day

Name a fruit or vegetable that you plan to try next week.

Student, ask your parent these questions about fruits and vegetables, and fill in their responses below.

What is your favorite fruit? _____

Do you have this fruit in your house right now? Yes No (circle one)

What is your favorite vegetable? _____

Do you have this vegetable in your house right now? Yes No (circle one)

About how often do you eat a serving of fruit?

_____ times per day

About how often do you eat a serving of vegetables?

_____ times per day

Name a fruit or vegetable that you want your family to try next week.
