

ATTENTION
 Food Safety Inspectors!
 Use this survey to check out
 your food safety practices at home.

BE A BAC BUSTER!

HOME FOOD SAFETY SURVEY

Date Started: _____



DID YOU . . .

1. Use a cold pack for packed lunches or picnic foods?
2. Refrigerate leftovers right away?
3. Defrost foods in:
 - the refrigerator
 - or
 - cold water
 - or
 - the microwave?



FRIDGE EXAM

The refrigerator is set at _____ degrees.

Food storage containers found:

____ tall containers

____ shallow containers



DID YOU . . .

4. Wash hands with warm water and soap for 20 seconds before preparing food?
5. Wash hands with warm water and soap for 20 seconds before eating?
6. Clean countertops before preparing food?
7. Rinse fruits and vegetables with cold running water before preparing them?
8. Rinse fruits and vegetables with cold running water before eating them?



Family Handwashing Scoreboards:

| Date: | Name: | When washed: |
|-------|-------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

**Answer questions 1-15:
 Y = Yes N = No**

Add the initials of family members in each column head.

| | A | B | C | D |
|-------|--------|--------|--------|--------|
| ME | _____ | _____ | _____ | _____ |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| TOTAL | Y N | Y N | Y N | Y N |



| | A | B | C | D |
|-------|--------|--------|--------|--------|
| ME | _____ | _____ | _____ | _____ |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| TOTAL | Y N | Y N | Y N | Y N |



SEPARATE

Cutting Board Critique

Number of cutting boards:

Type (plastic, wood, etc.): _____

DID YOU . . .

9. Clean the cutting boards used for raw meat, fish and poultry before using for any other foods?
10. Keep raw meat, fish and poultry wrapped properly in the refrigerator so juices do not drip on other foods?
11. Put cooked meat, fish or poultry on a different platter than the one with the raw juices?



| | A | B | C | D |
|-------|--------|--------|--------|--------|
| 9. | | | | |
| 10. | | | | |
| 11. | | | | |
| TOTAL | Y N | Y N | Y N | Y N |

COOK

DID YOU . . .

12. Rotate food in the microwave to avoid "cold spots?"
13. Bring sauces, soups and gravy to a boil when reheating?
14. Make sure eggs were cooked properly?
15. Not eat cookie dough or cake batter that was made with raw eggs?



| | A | B | C | D |
|-------|--------|--------|--------|--------|
| 12. | | | | |
| 13. | | | | |
| 14. | | | | |
| 15. | | | | |
| TOTAL | Y N | Y N | Y N | Y N |

Safe Temperature Summary

Kind of Meat: _____ Date Cooked: _____ Food thermometer temp: _____

Kind of Poultry: _____ Date Cooked: _____ Food thermometer temp: _____

Kind of Fish: _____ Date Cooked: _____ Food thermometer temp: _____

Date Completed: _____ Student signature: _____

Parent/Guardian signature: _____