

**Cooking skills study group – Application form**

1. Name of your group or agency
2. Address

1. Email
2. Telephone
3. Name and role of person who will take part in the study group

1. Name and role of a second person in your organisation who will take part in the study group (if a second person is available)

1. Please tell us briefly about your organisation, including how it is managed and what food and health activities it does.

1. Please tell us about the participants that attend your cooking courses.

1. Please tell us briefly about how you run your hands-on cooking skills courses, including:
   * how often you run them
   * the duration of the courses
   * who runs them
   * how the recipes are chosen
   * how (and if) nutrition messages are included
   * how participants are taught the recipes
   * any other activities that take place
   * if your course sessions end with a meal at the end of the session or if participants take a meal home with them.

1. Please tell us; approximately, how many participants complete each cooking skills course.

1. What difference are you trying to make to participants through your cooking courses?

1. How do you evaluate your cooking skills courses?
2. What methods do you usually use? (please tick as many as you wish)

Informal feedback

Questionnaires

Visual or active methods

(such as the evaluation wheel, outcomes star, etc.)

Focus groups

Observation methods

Personal support plans (or similar)

Quizzes/ games

Formal assessment of skills or knowledge

Anything else? (Please tell us what these are)

1. At what stages of your courses do you usually use these methods? (please tick as many as you wish)

Before, or at the start of the course (base-line)

During the course

At the end of each course

When you follow up participants after the course

**Please enclose (or attach) some examples of evaluation methods you have used with your application.**

Finally, please tell us why you would like to be involved in the cooking skills study group.

**Managers or Board member’s agreement**

Your application must be agreed by your line-manager or a management committee / steering group member.

Manager / Committee or Board member’s name:

Their role     

Email address

Telephone

Please send your application form to Kim Newstead by **5pm Friday 28 August.** Please send this by email to [kim.newstead@nhs.net](mailto:kim.newstead@nhs.net) or post to:

Cooking skills study group

Community Food and Health (Scotland),

NHS Health Scotland,

Meridian Court,

5 Cadogan Street

Glasgow G2 6QE

**We will let you know if your application has been successful or not, or if we would like to discuss your application further with you, shortly after the closing date.**

**Thank you.**

