#### Name: Friday 26th February

#### Can I evaluate my healthy sandwich?

#### What is the name of your sandwich? ……………………………………………………………………..

What did you think about your sandwich:

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1. ­­­­­ taste……………………………………………….

1. ­­­­­ appearance (What it looks like)…….

1. ­­­­­ shape………………………………………………

1. ­­­­­ texture…(What it feels like).…..

1. Did your instructions work?

 Were they easy to follow?

1. What did you enjoy the most about making your sandwich?

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1. What would you change if you were making your sandwich again?

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1. List some rules of hygiene you used when making your sandwich

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Marks out of 10: ………/10