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**HEALTHIER TN**



## Taste Test Challenge

**Objective:** To encourage employees to engage in healthier eating habits in the workplace by introducing them to new foods.

**Time Duration:** This is a one-day challenge.

**How to Participate:** Participants will taste various food/beverage samples and complete a "Taste Test Score Sheet" during this challenge.

*Let's Go!*



# Taste Test Challenge

## **Getting Started:**

1. Decide what day, time and location your “Taste Test” will run. (Book a space if needed.)
2. Choose a theme for your “Taste Test.” (For example: Winter Produce, Sugar-Free Drinks, Milk Substitutes, etc.)
3. Announce the challenge to employees. (This can be done via email, eNewsletter, department intranet and/or fliers.)

## **Conduct the Challenge:**

1. Send a reminder to employees about the “Taste Test” and how they can participate.
2. Set-up:
  - Purchase and prepare foods/beverages that participants will be taste testing. (Remember, this is a blind taste test so no product labels should be showing!)
  - Print and cut out the “Taste Test Labels” to pair with samples.
    - On the “Taste Test Answer Key,” note the name of the samples so you can reference later.
3. Print:
  - [Participation Tracking Sheet](#)
  - [Taste Test Score Sheets](#)
4. After the “Taste Test”, share the final results of the challenge with employees!
  - Don’t forget to compile challenge stats to submit to your department’s Point Tracker. (Include any photos [with permission](#) to [WFHT.TN@tn.gov](mailto:WFHT.TN@tn.gov))

## **Materials Needed:**

- Sample cups, napkins, utensils, etc.
- [Participation Tracking Sheet](#)
- [Taste Test Score Sheets](#)
- Prizes (optional)

# Taste Test Answer Key

INTERNAL USE ONLY

\*\*NOTE: You may not need to use all labels, depending on the number of samples offered.

<i>Example Theme: Milk Substitutes</i>		
<b>A</b> <i>Non-Fat Milk</i>	<b>B</b> <i>Unsweet Almond Milk</i>	<b>C</b> <i>Plain Soy Milk</i>
<b>A1</b> _____	<b>B1</b> _____	<b>C1</b> _____
<b>A2</b> _____	<b>B2</b> _____	<b>C2</b> _____
<b>A3</b> _____	<b>B3</b> _____	<b>C3</b> _____
<b>A4</b> _____	<b>B4</b> _____	<b>C4</b> _____
<b>A5</b> _____	<b>B5</b> _____	<b>C5</b> _____

# Taste Test Labels

*INTERNAL USE ONLY*

\*\*NOTE: You may not need to use all labels, depending on the number of samples offered.

<b>A1</b>	<b>B1</b>	<b>C1</b>
<b>A2</b>	<b>B2</b>	<b>C2</b>
<b>A3</b>	<b>B3</b>	<b>C3</b>
<b>A4</b>	<b>B4</b>	<b>C4</b>
<b>A5</b>	<b>B5</b>	<b>C5</b>



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## Taste Test Score Sheet

DIRECTIONS: In each row, circle which sample you liked the most!

Participant Name: \_\_\_\_\_

<b>A1</b>	<b>B1</b>	<b>C1</b>
<b>A2</b>	<b>B2</b>	<b>C2</b>
<b>A3</b>	<b>B3</b>	<b>C3</b>
<b>A4</b>	<b>B4</b>	<b>C4</b>
<b>A5</b>	<b>B5</b>	<b>C5</b>