

Florida Health Literacy Grant Initiative
2018 Post-Assessment: Staying Healthy for Beginners

Student First Name _____

Student Last Name _____

Organization Code _____

Please record answers on this answer sheet. Read each test question and fill in the answer circle that has the letter of the correct answer.

Lea cada pregunta y llene el círculo con la letra que corresponde con la respuesta correcta.

Ⓐ Ⓑ Ⓒ

Staying Healthy Beginners Post Assessment

1. Ⓐ Ⓑ <input type="checkbox"/>	8. <input type="checkbox"/> Ⓑ
2. Ⓐ <input type="checkbox"/> Ⓒ	9. Ⓐ <input type="checkbox"/> Ⓒ
3. Ⓐ Ⓑ <input type="checkbox"/>	10. Ⓐ <input type="checkbox"/> Ⓒ
4. Ⓐ <input type="checkbox"/> Ⓒ	11. Ⓐ <input type="checkbox"/> Ⓒ
5. <input type="checkbox"/> Ⓑ Ⓒ	12. <input type="checkbox"/> Ⓑ Ⓒ
6. <input type="checkbox"/> Ⓑ	13. <input type="checkbox"/> Ⓑ
7. <input type="checkbox"/> Ⓑ	

Form Identifier -- Do not mark
