1. a. Explain to your counselor the most likely hazards you may encounter while participating in cooking activities and what you should do to anticipate, help prevent, mitigate, and respond to these hazards.

|  |  |
| --- | --- |
| Hazard | How to anticipate, help prevent, mitigate, and respond |
|  |  |
|  |
|  |
|  |
|  |
|  |  |
|  |
|  |
|  |
|  |
|  |  |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
|  |  |
|  |
|  |
|  |
|  |
|  |  |
|  |
|  |
|  |
|  |

 b. Show that you know first aid for and how to prevent injuries or illnesses that could occur while preparing meals and eating, including burns and scalds, cuts, choking, and allergic reactions.

|  |  |
| --- | --- |
| Burns and scalds |  |
|  |
|  |
|  |
|  |
| Cuts |  |
|  |
|  |
|  |
|  |
| Choking |  |
|  |
|  |
|  |
|  |
| Allergic reactions |  |
|  |
|  |
|  |
|  |

 c. Describe how meat, fish, chicken, eggs, dairy products, and fresh vegetables should be stored, transported, and properly prepared for cooking.

|  |  |
| --- | --- |
| Meat | .0 |
|  |
|  |
| Fish |  |
|  |
|  |
| Chicken |  |
|  |
|  |
| Eggs |  |
|  |
|  |
| Dairy Products |  |
|  |
|  |
| Fresh Vegetables |  |
|  |
|  |

 Explain how to prevent cross-contamination.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

 d. Discuss with your counselor food allergies, food intolerance, and food-related illnesses and diseases.

|  |  |
| --- | --- |
| Food allergies |  |
|  |
|  |
|  |
| Food-related illnesses |  |
|  |
|  |
|  |
| Food intolerance |  |
|  |
|  |
|  |
| Food-related diseases |  |
|  |
|  |
|  |

 Explain why someone who handles or prepares food needs to be aware of these concerns.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 e. Discuss with your counselor why reading food labels is important.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 Explain how to identify common allergens such as peanuts, tree nuts, milk, eggs, wheat, soy, and shellfish.

|  |  |
| --- | --- |
| Peanuts |  |
| Tree nuts |  |
| Milk |  |
| Eggs |  |
| Wheat |  |
| Soy |  |
| Shellfish |  |

2. **Nutrition**. Do the following:

 a. Using the MyPlate food guide or the current USDA nutrition model, give five examples for EACH of the following food groups, the recommended number of daily servings, and the recommended serving size:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | Example | Daily servings | Serving Size |
| 1. | Fruits  |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| 2. | Vegetables |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| 3. | Grains |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| 4. | Proteins |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| 5. | Dairy |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

 b. Explain why you should limit your intake of oils and sugars.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

 c. Determine your daily level of activity and your caloric need based on your activity level.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 Then, based on the MyPlate food guide, discuss with your counselor an appropriate meal plan for yourself for one day.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 d. Discuss your current eating habits with your counselor and what you can do to eat healthier, based on the MyPlate food guide.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 e. Discuss the following food label terms: calorie, fat, saturated fat, trans fat, cholesterol, sodium, carbohydrate, dietary fiber, sugar, protein.

|  |  |
| --- | --- |
| Calorie |  |
|  |
|  |
| Fat |  |
|  |
|  |
| Saturated fat |  |
|  |
|  |
| Trans fat |  |
|  |
|  |
| Cholesterol |  |
|  |
|  |
| Sodium |  |
|  |
|  |
| Carbohydrate |  |
|  |
|  |
| Dietary fiber |  |
|  |
|  |
| Sugar |  |
|  |
|  |
| Protein |  |
|  |
|  |

 Explain how to calculate total carbohydrates and nutritional values for two servings, based on the serving size specified on the label.

|  |  |
| --- | --- |
|  |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |  |
|  |
|  |
|  |
|  |
|  |
|  |

 3. **Cooking Basics**. Do the following:

 a. Discuss EACH of the following cooking methods. For each one, describe the equipment needed, how temperature control is maintained, and name at least one food that can be cooked using that method: baking, boiling, broiling, pan frying, simmering, steaming, microwaving, grilling, foil cooking, and use of a Dutch oven.

|  |  |  |  |
| --- | --- | --- | --- |
| Method | Food | Equipment needed | How is food cooked and temperature maintained? |
| Baking |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Boiling |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Broiling |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Pan frying |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Simmering |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Steaming |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Microwaving |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Grilling |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Foil cooking |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Use of a Dutch oven |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

 b. Discuss the benefits of using a camp stove on an outing vs. a charcoal or wood fire.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 c. Describe for your counselor how to manage your time when preparing a meal so components for each course are ready to serve at the correct time.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**Note: The meals prepared for Cooking merit badge requirements 4, 5, and 6 will count only toward fulfilling those requirements and will not count toward rank advancement or other merit badges. Meals prepared for rank advancement or other merit badges may not count toward the Cooking merit badge. You must not repeat any menus for meals actually prepared or cooked in requirements 4, 5, and 6.**

4. **Cooking at home.** Using the MyPlate food guide or the current USDA nutrition model, plan menus for three full days of meals (three breakfasts, three lunches, and three dinners) plus one dessert. Your menus should include enough to feed yourself and at least one adult, keeping in mind any special needs (such as food allergies) and how you keep your foods safe and free from cross-contamination. List the equipment and utensils needed to prepare and serve these meals.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Day 1 | Menu |  | Quantity | Equipment | Utensils |
| BREAKFAST | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| LUNCH | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| DINNER | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Day 2 | Menu |  | Quantity | Equipment | Utensils |
| BREAKFAST | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| LUNCH | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| DINNER | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Day 3 | Menu | Quantity | Equipment | Utensils |
| BREAKFAST | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| LUNCH | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| DINNER | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| DESSERT |  |  |  |  |  |
|  |  |  |  |  |

 Then do the following:

a. Create a shopping list for your meals showing the amount of food needed to prepare and serve each meal, and the cost for each meal.

|  |  |  |  |
| --- | --- | --- | --- |
| Breakfast 1 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Breakfast 1 Total Cost |  |
| Breakfast 2 |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  Breakfast 2 Total Cost |  |
| Breakfast 3 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  Breakfast 3Total Cost |  |
| Lunch 1 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Lunch 1 Total Cost |  |
| Lunch 2 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Lunch 2 Total Cost |  |
| Lunch 3 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Lunch 3 Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Dinner 1 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Dinner 1 Total Cost |  |
| Dinner 2 |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Dinner 2 Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Dinner 3 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Dinner 3 Total Cost |  |
| Dessert |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Dessert Total Cost |  |

⬜ b. Share and discuss your meal plan and shopping list with your counselor.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

⬜ c. Using at least five of the 10 cooking methods from requirement 3, prepare and serve yourself and at least one adult (parent, family member, guardian, or other responsible adult) one breakfast, one lunch, one dinner, and one dessert from the meals you planned.\*

Cooking methods used:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ⬜ | Baking | ⬜ | Boiling | ⬜ | Broiling | ⬜ | Pan frying | ⬜ | Simmering |
| ⬜ | Steaming | ⬜ | Microwaving | ⬜ | Grilling | ⬜ | Foil Cooking | ⬜ | Dutch oven |

⬜ d. Time your cooking to have each meal ready to serve at the proper time. Have an adult verify the preparation of the meal to your counselor.

⬜ Breakfast No. Date: Adult’s verification:

⬜ Lunch No. Date: Adult’s verification:

⬜ Dinner No, Date: Adult’s verification:

⬜ Dessert Date: Adult’s verification:

e. After each meal, ask a person you served to evaluate the meal on presentation and taste, then evaluate your own meal. Discuss what you learned with your counselor, including any adjustments that could have improved or enhanced your meals. Tell how planning and preparation help ensure a successful meal.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**\*The meals for requirement 4 may be prepared on different days, and they need not be prepared consecutively. The requirement calls for Scouts to plan, prepare, and serve one breakfast, one lunch, one dinner, and one dessert to at least one adult; those served need not be the same for all meals.**

 5. **Camp Cooking**. Do the following.

 a. Using the MyPlate food guide or the current USDA nutrition model, plan five meals for your patrol or a similar size group of up to eight youth, including you) for a camping trip Your menus should include enough food for each person, keeping in mind any special needs (such as food allergies) and how you keep your foods safe and free from cross-contamination. These five meals must include at least one breakfast, one lunch, one dinner, AND at least one snack OR one dessert. List the equipment and utensils needed to prepare and serve these meals.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Menu |  | Quantity | Equipment | Utensils |
| Meal 1Breakfast | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Meal 2Lunch | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Menu |  | Quantity | Equipment | Utensils |
| Meal 3Dinner | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Meal 4Choose:⬜ Snack or ⬜ Dessert | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Menu |  | Quantity | Equipment | Utensils |
| Meal 5Choose:⬜ Breakfast⬜ Lunch⬜Dinner⬜ Snack⬜ Dessert | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

 Then do the following:

b. Create a shopping list for your meals showing the amount of food needed to prepare and serve each meal, and the cost for each meal.

|  |  |  |  |
| --- | --- | --- | --- |
| Meal 1 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Meal 1 Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Meal 2 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Meal 2 Total Cost |  |
| Meal 3 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Meal 3 Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Meal 4 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Meal 4 Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Meal 5 |  |  |  |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | Meal 5 Total Cost |  |

⬜ c. Share and discuss your meal plan and shopping list with your counselor.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

⬜ d. In the outdoors, using your menu plans for this requirement, cook two of the five meals you planned using either a lightweight stove or a low-impact fire. Use a different cooking method from requirement 3 for each meal. You must also cook a third meal using either a Dutch oven OR a foil pack OR kabobs. Serve all of these meals to your patrol or a group of youth. \*\*

⬜ Meal 1 Heat Source: Method: Date:

⬜ Meal 2 Heat Source: Method: Date:

⬜ Meal 3 Heat Source: Method: Date:

⬜ e. In the outdoors, prepare a dessert OR a snack and serve it to your patrol or a group of youth.\*\*

⬜ Dessert or Snack:: Date:

⬜ f. After each meal, have those you served evaluate the meal on presentation and taste, and then evaluate your own meal.

|  |  |  |
| --- | --- | --- |
| Meal | Evaluation by those served | Self Evaluation |
| Presentation | Taste | Presentation | Taste |
| Meal 1 |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Meal 2 |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Meal 3 |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Meal 4 |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Meal 5 |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Snack |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

 Discuss what you learned with your counselor, including any adjustments that could have improved or enhanced your meals. Tell how planning and preparation help ensure successful outdoor cooking.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 g. Explain to your counselor how you cleaned the equipment, utensils, and the cooking site thoroughly after each meal. Explain how you properly disposed of dishwater and of all garbage.

|  |
| --- |
| . |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 Explain how you properly disposed of dishwater and of all garbage.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 h. Discuss how you followed the Outdoor Code and no-trace principles when preparing your meals.

|  |
| --- |
| . |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 6. **Trail and backpacking meals.** Do the following.

 a. Using the MyPlate food guide or the current USDA nutrition model, plan a menu for trail hiking or backpacking that includes one breakfast, one lunch, one dinner, and one snack. These meals must not require refrigeration and are to be consumed by three to five people (including you). Be sure to keep in mind any special needs (such as food allergies) and how you will keep your foods safe and free from cross-contamination. List the equipment and utensils needed to prepare and serve these meals.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Menu |  | Quantity | Equipment | Utensils |
| Breakfast | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Lunch | Menu |  | Quantity | Equipment | Utensils |
| Meal 5 | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Desert orSnack |  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dinner | Menu |  | Quantity | Equipment | Utensils |
| Meal 5 | Fruits |  |  |  |  |
| Vegetables |  |  |  |  |
| Grains |  |  |  |  |
| Proteins |  |  |  |  |
| Dairy |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Desert orSnack |  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Snack | Menu |  | Quantity | Equipment | Utensils |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Desert orSnack |  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

b. Create a shopping list for your meals showing the amount of food needed to prepare and serve each meal, and the cost for each meal.

|  |  |  |  |
| --- | --- | --- | --- |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Breakfast | Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Lunch | Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Dinner | Total Cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Menu Item | Components to purchase | Quantity | Cost |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Snack | Total Cost |  |

⬜ c. Share and discuss your meal plan and shopping list with your counselor. Your plan must include how to repackage foods for your hike or backpacking trip to eliminate as much bulk, weight, and garbage as possible.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

⬜ d. While on a trail hike or backpacking trip, prepare and serve two meals and a snack from the menu planned for this requirement. At least one of those meals must be cooked over a fire, or an approved trail stove (with proper supervision).\*\*

⬜ Meal 1 Heat Source: Date:

⬜ Meal 2 Heat Source: Date:

⬜ Snack Heat Source: Date:

⬜ e. After each meal, have those you served evaluate the meal on presentation and taste, and then evaluate your own meal.

|  |  |  |
| --- | --- | --- |
| Meal | Evaluation by those served | Self Evaluation |
| Presentation | Taste | Presentation | Taste |
| Meal 1 |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Meal 2 |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Snack |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

 Discuss what you learned with your counselor, including any adjustments that could have improved or enhanced your meals. Tell how planning and preparation help ensure successful trail hiking or backpacking meals.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

⬜ f.. Discuss how you followed the Outdoor Code and no-trace principles during your outing.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 Explain to your counselor how you cleaned any equipment, utensils, and the cooking site after each meal.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 Explain how you properly disposed of any dishwater and packed out all garbage.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

7.. **Food-related careers**. Find out about three career opportunities in cooking.

**\*\*Where local regulations do not allow you to build a fire, the counselor may adjust the requirement to meet the law. The meals in requirements 5 and 6 may be prepared for different trips and need not be prepared consecutively. Scouts working on this badge in summer camp should take into consideration foods that can be obtained at the camp commissary.**

|  |  |
| --- | --- |
| 1. |  |
| 2. |  |
| 3. |  |

Select one and find out the education, training, and experience required for this profession.

|  |  |
| --- | --- |
| Career: |  |
| Education: |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Training: |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Experience: |  |
|  |
|  |
|  |
|  |
|  |

Discuss this with your counselor, and explain why this profession might interest you.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**When working on merit badges, Scouts and Scouters should be aware of some vital information in the current edition of the *Guide to Advancement* (BSA publication 33088).Important excerpts from that publication can be downloaded from** [**http://usscouts.org/advance/docs/GTA-Excerpts-meritbadges.pdf**](http://usscouts.org/advance/docs/GTA-Excerpts-meritbadges.pdf)**.**

**You can download a complete copy of the *Guide to Advancement* from** [**http://www.scouting.org/filestore/pdf/33088.pdf**](http://www.scouting.org/filestore/pdf/33088.pdf)**.**