

Earth Day Survey

NAME _____

Never Sometimes Usually Always

	Never	Sometimes	Usually	Always
Do you use plastic straws?				
Do you recycle used paper?				
Do you turn off the lights when you leave a room?				
Do you close the tap while brushing your teeth?				
Do you pick up trash?				
Do you use reusable water bottles?				
Do you leave food on your plate?				
Do you sort out plastic, glass and cans?				
Do you take short showers?				
Do you use plastic bags?				
Do you plant trees or flowers?				
Do you donate your old clothes and toys?				
Do you walk or ride a bike to school?				