## FOOD



## PLEASE NOTE THAT THE BELOW MATERIALS ARE NOT COMPULSORY TO BE

 USED AND IS PRESENT ONLY TO PROVIDE AN AID IN CONDUCTING THE SESSION.
## Questions:

1. What is your favorite kind of food? (You may choose each from categories of meal, beverages, desserts, etc.)
2. How often do you have your meals?
3. What does your dream meal plan look like?
4. What is a meal or snack you would not be able to live without?
5. Do you cook? If so, what is your favorite dish to make?
6. How often do you have meals from outside?
7. What is your favorite place to order food from (dine in/takeouts)
8. What is one essential food item you want to have in a gettogether?
9. Do you like verities of food or have a specific liking towards a certain taste?
10. What is one food item you have tasted that you will never forget?
11. What is one food item that you have not tasted for a long time?
12. What one food item brings back memories of your childhood?
13. What is one food item you would want to learn to cook?
14. What is the food item you have tasted the most? Describe the taste from your point of view.

NOTE -. YOU CAN USE YOUR OWN QUESTIONS DURING THE SESSION RELATED TO MUSIC.
$\$$ Video links that could be screen-shared during the session for a more interactive session.

