KidsHealth in the Classroom

Personal Health Series

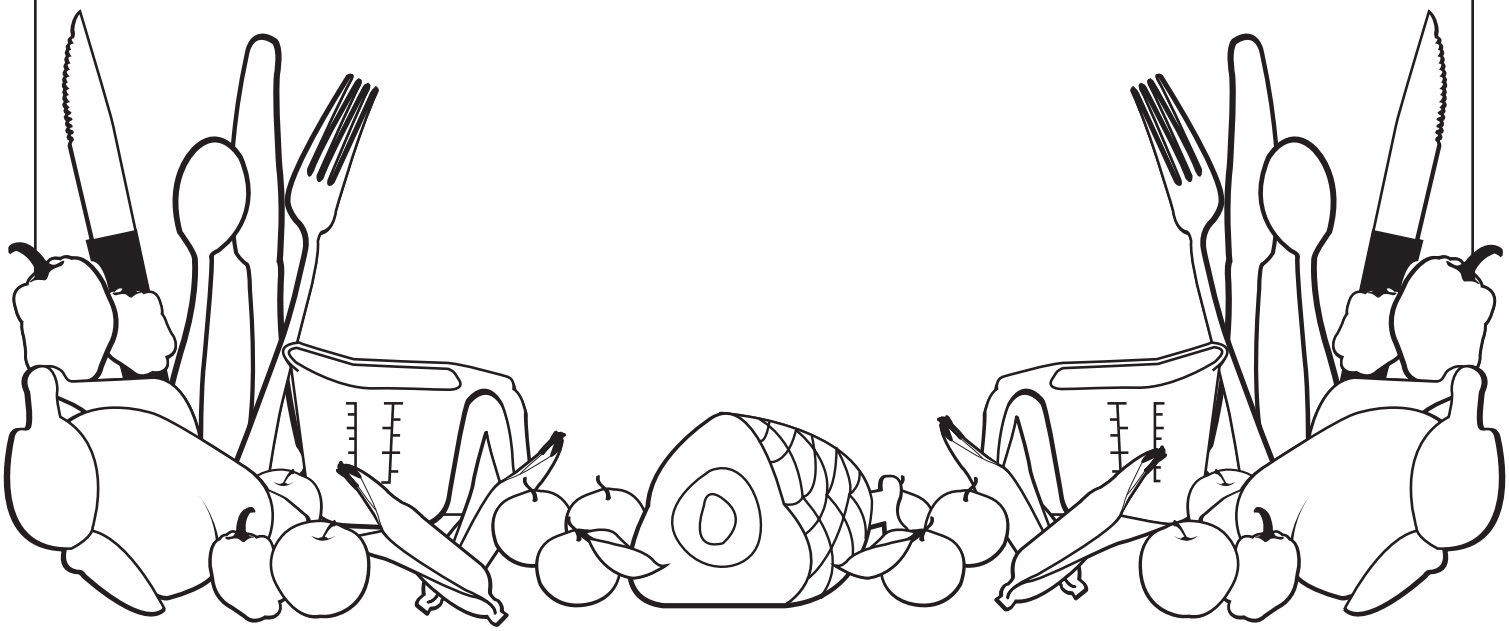
Food and Cooking Safety

Name: **Date:**

Kitchen Caution Story

Dear Mom or Dad: Please tell me about a time you or someone you know got food poisoning or was injured while cooking or baking. Also, please tell me a safety tip that could have been used to avoid the problem.

Instructions: Draw a picture or write about a time someone got food poisoning or was injured while cooking or baking.



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