

Milk Quality

Milk A

Group: 1 Contestant: 1

Name _____

School _____



* 1 7 0 5 0 0 1 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5	
Bitter	___	___	___	___	___	1
Cooked	___	___	___	___	___	2
Flat - Watery	___	___	___	___	___	3
Feed	___	___	___	___	___	4
Foreign	___	___	___	___	___	5
Garlic or Onion	___	___	___	___	___	6
High Acid	___	___	___	___	___	7
Malty	___	___	___	___	___	8
Metallic / Oxidized	___	___	___	___	___	9
Rancid	___	___	___	___	___	10
Salty	___	___	___	___	___	11
Unclean	___	___	___	___	___	12
No Defect	___	___	___	___	___	13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk A

Group: 2 Contestant: 2

Name _____

School _____



* 1 7 0 5 0 0 2 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5	
Bitter	___	___	___	___	___	1
Cooked	___	___	___	___	___	2
Flat - Watery	___	___	___	___	___	3
Feed	___	___	___	___	___	4
Foreign	___	___	___	___	___	5
Garlic or Onion	___	___	___	___	___	6
High Acid	___	___	___	___	___	7
Malty	___	___	___	___	___	8
Metallic / Oxidized	___	___	___	___	___	9
Rancid	___	___	___	___	___	10
Salty	___	___	___	___	___	11
Unclean	___	___	___	___	___	12
No Defect	___	___	___	___	___	13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk A

Group: 3 Contestant: 3

Name _____

School _____



* 1 7 0 5 0 0 3 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5	
Bitter	___	___	___	___	___	1
Cooked	___	___	___	___	___	2
Flat - Watery	___	___	___	___	___	3
Feed	___	___	___	___	___	4
Foreign	___	___	___	___	___	5
Garlic or Onion	___	___	___	___	___	6
High Acid	___	___	___	___	___	7
Malty	___	___	___	___	___	8
Metallic / Oxidized	___	___	___	___	___	9
Rancid	___	___	___	___	___	10
Salty	___	___	___	___	___	11
Unclean	___	___	___	___	___	12
No Defect	___	___	___	___	___	13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk A

Group: 4 Contestant: 4

Name _____

School _____



* 1 7 0 5 0 0 4 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	_____	_____	_____	_____	_____
					1
Cooked	_____	_____	_____	_____	_____
					2
Flat - Watery	_____	_____	_____	_____	_____
					3
Feed	_____	_____	_____	_____	_____
					4
Foreign	_____	_____	_____	_____	_____
					5
Garlic or Onion	_____	_____	_____	_____	_____
					6
High Acid	_____	_____	_____	_____	_____
					7
Malty	_____	_____	_____	_____	_____
					8
Metallic / Oxidized	_____	_____	_____	_____	_____
					9
Rancid	_____	_____	_____	_____	_____
					10
Salty	_____	_____	_____	_____	_____
					11
Unclean	_____	_____	_____	_____	_____
					12
No Defect	_____	_____	_____	_____	_____
					13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk A

Group: 1 Contestant: 5

Name _____

School _____



* 1 7 0 5 0 0 5 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	_____	_____	_____	_____	_____
					1
Cooked	_____	_____	_____	_____	_____
					2
Flat - Watery	_____	_____	_____	_____	_____
					3
Feed	_____	_____	_____	_____	_____
					4
Foreign	_____	_____	_____	_____	_____
					5
Garlic or Onion	_____	_____	_____	_____	_____
					6
High Acid	_____	_____	_____	_____	_____
					7
Malty	_____	_____	_____	_____	_____
					8
Metallic / Oxidized	_____	_____	_____	_____	_____
					9
Rancid	_____	_____	_____	_____	_____
					10
Salty	_____	_____	_____	_____	_____
					11
Unclean	_____	_____	_____	_____	_____
					12
No Defect	_____	_____	_____	_____	_____
					13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk A

Group: 2 Contestant: 6

Name _____

School _____



* 1 7 0 5 0 0 6 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	_____	_____	_____	_____	_____
					1
Cooked	_____	_____	_____	_____	_____
					2
Flat - Watery	_____	_____	_____	_____	_____
					3
Feed	_____	_____	_____	_____	_____
					4
Foreign	_____	_____	_____	_____	_____
					5
Garlic or Onion	_____	_____	_____	_____	_____
					6
High Acid	_____	_____	_____	_____	_____
					7
Malty	_____	_____	_____	_____	_____
					8
Metallic / Oxidized	_____	_____	_____	_____	_____
					9
Rancid	_____	_____	_____	_____	_____
					10
Salty	_____	_____	_____	_____	_____
					11
Unclean	_____	_____	_____	_____	_____
					12
No Defect	_____	_____	_____	_____	_____
					13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk B

Group: 1 Contestant: 1

Name _____

School _____



* 1 7 0 4 0 0 1 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Milk Quality

Milk B

Group: 2 Contestant: 2

Name _____

School _____



* 1 7 0 4 0 0 2 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Milk Quality

Milk B

Group: 3 Contestant: 3

Name _____

School _____



* 1 7 0 4 0 0 3 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5	
Bitter	_____	_____	_____	_____	_____	1
Cooked	_____	_____	_____	_____	_____	2
Flat - Watery	_____	_____	_____	_____	_____	3
Feed	_____	_____	_____	_____	_____	4
Foreign	_____	_____	_____	_____	_____	5
Garlic or Onion	_____	_____	_____	_____	_____	6
High Acid	_____	_____	_____	_____	_____	7
Malty	_____	_____	_____	_____	_____	8
Metallic / Oxidized	_____	_____	_____	_____	_____	9
Rancid	_____	_____	_____	_____	_____	10
Salty	_____	_____	_____	_____	_____	11
Unclean	_____	_____	_____	_____	_____	12
No Defect	_____	_____	_____	_____	_____	13

Sample:	1	2	3	4	5	
Bitter	_____	_____	_____	_____	_____	1
Cooked	_____	_____	_____	_____	_____	2
Flat - Watery	_____	_____	_____	_____	_____	3
Feed	_____	_____	_____	_____	_____	4
Foreign	_____	_____	_____	_____	_____	5
Garlic or Onion	_____	_____	_____	_____	_____	6
High Acid	_____	_____	_____	_____	_____	7
Malty	_____	_____	_____	_____	_____	8
Metallic / Oxidized	_____	_____	_____	_____	_____	9
Rancid	_____	_____	_____	_____	_____	10
Salty	_____	_____	_____	_____	_____	11
Unclean	_____	_____	_____	_____	_____	12
No Defect	_____	_____	_____	_____	_____	13

Sample:	1	2	3	4	5	
Bitter	_____	_____	_____	_____	_____	1
Cooked	_____	_____	_____	_____	_____	2
Flat - Watery	_____	_____	_____	_____	_____	3
Feed	_____	_____	_____	_____	_____	4
Foreign	_____	_____	_____	_____	_____	5
Garlic or Onion	_____	_____	_____	_____	_____	6
High Acid	_____	_____	_____	_____	_____	7
Malty	_____	_____	_____	_____	_____	8
Metallic / Oxidized	_____	_____	_____	_____	_____	9
Rancid	_____	_____	_____	_____	_____	10
Salty	_____	_____	_____	_____	_____	11
Unclean	_____	_____	_____	_____	_____	12
No Defect	_____	_____	_____	_____	_____	13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk B

Group: 4 Contestant: 4

Name _____

School _____



* 1 7 0 4 0 0 4 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk B

Group: 1 Contestant: 5

Name _____

School _____



* 1 7 0 4 0 0 5 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk B

Group: 2 Contestant: 6

Name _____

School _____



* 1 7 0 4 0 0 6 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk C

Group: 1 Contestant: 1

Name _____

School _____



* 1 7 0 3 0 0 1 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample: 1 2 3 4 5

Bitter	___	___	___	___	___		1
Cooked	___	___	___	___	___		2
Flat - Watery	___	___	___	___	___		3
Feed	___	___	___	___	___		4
Foreign	___	___	___	___	___		5
Garlic or Onion	___	___	___	___	___		6
High Acid	___	___	___	___	___		7
Malty	___	___	___	___	___		8
Metallic / Oxidized	___	___	___	___	___		9
Rancid	___	___	___	___	___		10
Salty	___	___	___	___	___		11
Unclean	___	___	___	___	___		12
No Defect	___	___	___	___	___		13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk C

Group: 2 Contestant: 2

Name _____

School _____



* 1 7 0 3 0 0 2 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample: 1 2 3 4 5

Bitter	___	___	___	___	___		1
Cooked	___	___	___	___	___		2
Flat - Watery	___	___	___	___	___		3
Feed	___	___	___	___	___		4
Foreign	___	___	___	___	___		5
Garlic or Onion	___	___	___	___	___		6
High Acid	___	___	___	___	___		7
Malty	___	___	___	___	___		8
Metallic / Oxidized	___	___	___	___	___		9
Rancid	___	___	___	___	___		10
Salty	___	___	___	___	___		11
Unclean	___	___	___	___	___		12
No Defect	___	___	___	___	___		13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk C

Group: 3 Contestant: 3

Name _____

School _____



* 1 7 0 3 0 0 3 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample: 1 2 3 4 5

Bitter	___	___	___	___	___		1
Cooked	___	___	___	___	___		2
Flat - Watery	___	___	___	___	___		3
Feed	___	___	___	___	___		4
Foreign	___	___	___	___	___		5
Garlic or Onion	___	___	___	___	___		6
High Acid	___	___	___	___	___		7
Malty	___	___	___	___	___		8
Metallic / Oxidized	___	___	___	___	___		9
Rancid	___	___	___	___	___		10
Salty	___	___	___	___	___		11
Unclean	___	___	___	___	___		12
No Defect	___	___	___	___	___		13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk C

Group: 4 Contestant: 4

Name _____

School _____



* 1 7 0 3 0 0 4 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk C

Group: 1 Contestant: 5

Name _____

School _____



* 1 7 0 3 0 0 5 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk C

Group: 2 Contestant: 6

Name _____

School _____



* 1 7 0 3 0 0 6 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk D

Group: 1 Contestant: 1

Name _____

School _____



* 1 7 0 2 0 0 1 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample: 1 2 3 4 5

Bitter	_____	_____	_____	_____	_____		1
Cooked	_____	_____	_____	_____	_____		2
Flat - Watery	_____	_____	_____	_____	_____		3
Feed	_____	_____	_____	_____	_____		4
Foreign	_____	_____	_____	_____	_____		5
Garlic or Onion	_____	_____	_____	_____	_____		6
High Acid	_____	_____	_____	_____	_____		7
Malty	_____	_____	_____	_____	_____		8
Metallic / Oxidized	_____	_____	_____	_____	_____		9
Rancid	_____	_____	_____	_____	_____		10
Salty	_____	_____	_____	_____	_____		11
Unclean	_____	_____	_____	_____	_____		12
No Defect	_____	_____	_____	_____	_____		13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk D

Group: 2 Contestant: 2

Name _____

School _____



* 1 7 0 2 0 0 2 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample: 1 2 3 4 5

Bitter	_____	_____	_____	_____	_____		1
Cooked	_____	_____	_____	_____	_____		2
Flat - Watery	_____	_____	_____	_____	_____		3
Feed	_____	_____	_____	_____	_____		4
Foreign	_____	_____	_____	_____	_____		5
Garlic or Onion	_____	_____	_____	_____	_____		6
High Acid	_____	_____	_____	_____	_____		7
Malty	_____	_____	_____	_____	_____		8
Metallic / Oxidized	_____	_____	_____	_____	_____		9
Rancid	_____	_____	_____	_____	_____		10
Salty	_____	_____	_____	_____	_____		11
Unclean	_____	_____	_____	_____	_____		12
No Defect	_____	_____	_____	_____	_____		13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk D

Group: 3 Contestant: 3

Name _____

School _____



* 1 7 0 2 0 0 3 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample: 1 2 3 4 5

Bitter	_____	_____	_____	_____	_____		1
Cooked	_____	_____	_____	_____	_____		2
Flat - Watery	_____	_____	_____	_____	_____		3
Feed	_____	_____	_____	_____	_____		4
Foreign	_____	_____	_____	_____	_____		5
Garlic or Onion	_____	_____	_____	_____	_____		6
High Acid	_____	_____	_____	_____	_____		7
Malty	_____	_____	_____	_____	_____		8
Metallic / Oxidized	_____	_____	_____	_____	_____		9
Rancid	_____	_____	_____	_____	_____		10
Salty	_____	_____	_____	_____	_____		11
Unclean	_____	_____	_____	_____	_____		12
No Defect	_____	_____	_____	_____	_____		13

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality

Milk D

Group: 4 Contestant: 4

Name _____

School _____



* 1 7 0 2 0 0 4 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Milk Quality

Milk D

Group: 1 Contestant: 5

Name _____

School _____



* 1 7 0 2 0 0 5 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Milk Quality

Milk D

Group: 2 Contestant: 6

Name _____

School _____



* 1 7 0 2 0 0 6 *

Write the Grade Defects on the line next to the type of defect for each of the 5 samples.

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

Sample:	1	2	3	4	5
Bitter	___	___	___	___	___
Cooked	___	___	___	___	___
Flat - Watery	___	___	___	___	___
Feed	___	___	___	___	___
Foreign	___	___	___	___	___
Garlic or Onion	___	___	___	___	___
High Acid	___	___	___	___	___
Malty	___	___	___	___	___
Metallic / Oxidized	___	___	___	___	___
Rancid	___	___	___	___	___
Salty	___	___	___	___	___
Unclean	___	___	___	___	___
No Defect	___	___	___	___	___

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality Cheese ID

Group: 1

Contestant: 1

Name _____

School _____



* 1 7 0 6 0 0 1 *

Milk Quality Cheese ID

Group: 2

Contestant: 2

Name _____

School _____



* 1 7 0 6 0 0 2 *

Milk Quality Cheese ID

Group: 3

Contestant: 3

Name _____

School _____



* 1 7 0 6 0 0 3 *

Write the sample number on the line next to the cheese varieties..

- _____ Blue 
- _____ Brie/Camembert 
- _____ Cheddar (mild) 
- _____ Cheddar (sharp) 
- _____ Colby 
- _____ Cream/Neufchatel 
- _____ Edam/Gouda 
- _____ Monterey (Jack) 
- _____ Mozzarella/Pizza 
- _____ Munster 
- _____ Processed American 
- _____ Provolone 
- _____ Swiss 

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Write the sample number on the line next to the cheese varieties..

- _____ Blue 
- _____ Brie/Camembert 
- _____ Cheddar (mild) 
- _____ Cheddar (sharp) 
- _____ Colby 
- _____ Cream/Neufchatel 
- _____ Edam/Gouda 
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- _____ Mozzarella/Pizza 
- _____ Munster 
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- _____ Mozzarella/Pizza 
- _____ Munster 
- _____ Processed American 
- _____ Provolone 
- _____ Swiss 

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Milk Quality Cheese ID

Group: 4

Contestant: 4

Name _____

School _____



* 1 7 0 6 0 0 4 *

Milk Quality Cheese ID

Group: 1

Contestant: 5

Name _____

School _____



* 1 7 0 6 0 0 5 *

Milk Quality Cheese ID

Group: 2

Contestant: 6

Name _____

School _____



* 1 7 0 6 0 0 6 *

Write the sample number on the line next to the cheese varieties..

_____	Blue	
_____	Brie/Camembert	
_____	Cheddar (mild)	
_____	Cheddar (sharp)	
_____	Colby	
_____	Cream/Neufchatel	
_____	Edam/Gouda	
_____	Monterey (Jack)	
_____	Mozzarella/Pizza	
_____	Munster	
_____	Processed American	
_____	Provolone	
_____	Swiss	

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Write the sample number on the line next to the cheese varieties..

_____	Blue	
_____	Brie/Camembert	
_____	Cheddar (mild)	
_____	Cheddar (sharp)	
_____	Colby	
_____	Cream/Neufchatel	
_____	Edam/Gouda	
_____	Monterey (Jack)	
_____	Mozzarella/Pizza	
_____	Munster	
_____	Processed American	
_____	Provolone	
_____	Swiss	

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



Write the sample number on the line next to the cheese varieties..

_____	Blue	
_____	Brie/Camembert	
_____	Cheddar (mild)	
_____	Cheddar (sharp)	
_____	Colby	
_____	Cream/Neufchatel	
_____	Edam/Gouda	
_____	Monterey (Jack)	
_____	Mozzarella/Pizza	
_____	Munster	
_____	Processed American	
_____	Provolone	
_____	Swiss	

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



**Milk Quality
Real Imitation**

Group: 1 Contestant: 1

Name _____

School _____



**Milk Quality
Real Imitation**

Group: 2 Contestant: 2

Name _____

School _____



**Milk Quality
Real Imitation**

Group: 3 Contestant: 3

Name _____

School _____



Write the sample number on the line next to the cheese varieties..

Write the sample number on the line next to the cheese varieties..

Write the sample number on the line next to the cheese varieties..

- _____ Butter-Real 
- _____ Margarine 
- _____ Dairy Cream-Real 
- _____ Non-dairy Cream 
- _____ Chocolate-Real 
- _____ Imitation Chocolate 
- _____ Sour Cream-Real 
- _____ Sour Cream-Imitation 
- _____ Cheese-Real 
- _____ Cheese-Imitation 

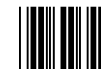
- _____ Butter-Real 
- _____ Margarine 
- _____ Dairy Cream-Real 
- _____ Non-dairy Cream 
- _____ Chocolate-Real 
- _____ Imitation Chocolate 
- _____ Sour Cream-Real 
- _____ Sour Cream-Imitation 
- _____ Cheese-Real 
- _____ Cheese-Imitation 

- _____ Butter-Real 
- _____ Margarine 
- _____ Dairy Cream-Real 
- _____ Non-dairy Cream 
- _____ Chocolate-Real 
- _____ Imitation Chocolate 
- _____ Sour Cream-Real 
- _____ Sour Cream-Imitation 
- _____ Cheese-Real 
- _____ Cheese-Imitation 

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



**Milk Quality
Real Imitation**

Group: 4 Contestant: 4

Name _____

School _____



**Milk Quality
Real Imitation**

Group: 1 Contestant: 5

Name _____

School _____



**Milk Quality
Real Imitation**

Group: 2 Contestant: 6

Name _____

School _____



Write the sample number on the line next to the cheese varieties..

Write the sample number on the line next to the cheese varieties..

Write the sample number on the line next to the cheese varieties..

- _____ Butter-Real 
- _____ Margarine 
- _____ Dairy Cream-Real 
- _____ Non-dairy Cream 
- _____ Chocolate-Real 
- _____ Imitation Chocolate 
- _____ Sour Cream-Real 
- _____ Sour Cream-Imitation 
- _____ Cheese-Real 
- _____ Cheese-Imitation 

- _____ Butter-Real 
- _____ Margarine 
- _____ Dairy Cream-Real 
- _____ Non-dairy Cream 
- _____ Chocolate-Real 
- _____ Imitation Chocolate 
- _____ Sour Cream-Real 
- _____ Sour Cream-Imitation 
- _____ Cheese-Real 
- _____ Cheese-Imitation 

- _____ Butter-Real 
- _____ Margarine 
- _____ Dairy Cream-Real 
- _____ Non-dairy Cream 
- _____ Chocolate-Real 
- _____ Imitation Chocolate 
- _____ Sour Cream-Real 
- _____ Sour Cream-Imitation 
- _____ Cheese-Real 
- _____ Cheese-Imitation 

PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED



PLEASE TURN CARDS IN, EVEN IF NO RESPONSES ARE MARKED

