

TASTE PANEL EVALUATION FORM

Type of Product Being Evaluated: _____

Samples Being Evaluated:

Sample A: _____

NAME

COST

Sample B: _____

Sample C: _____

Sample D: _____

Step 1: Agree upon the categories that apply to the sample(s).

Step 2: Enter the ratings (Use “5” for “Best” and “1” for “Worst”)

Category	Sample:	A	B	C	D
Color/Appearance					
Taste/Flavor					
Odor/Aroma					
Texture/Mouth-feel					
OPTIONAL					
After-taste					
Uniformity/Size					
(Other)					
(Other)					

Step 3: Total Points _____

Step 4: Is the product acceptable? _____

Step 5: Comments/Explanations

Name: _____

Date: _____