## Ground Beef Sensory Evaluation Form

Panelist ID ___________________ Date ___________ Time ________ am/pm Project ____________

<table>
<thead>
<tr>
<th>Sample</th>
<th>JUICINESS</th>
<th>COHESIVENESS</th>
<th>HARDNESS</th>
<th>TEXTURE</th>
<th>BEEF FLAVOR INTENSITY</th>
<th>BEEF FLAVOR</th>
<th>OFF FLAVOR</th>
<th>OFF-FLAVOR DESCRIPTORS</th>
</tr>
</thead>
</table>

### JUICINESS
- 8 Extremely juicy
- 7 Very juicy
- 6 Moderately juicy
- 5 Slightly juicy
- 4 Slightly dry
- 3 Moderately dry
- 2 Very dry
- 1 Extremely dry

### COHESIVENESS
- 8 Extremely cohesive
- 7 Very cohesive
- 6 Moderately cohesive
- 5 Slightly cohesive
- 4 Slightly crumbly
- 3 Moderately crumbly
- 2 Very crumbly
- 1 Extremely crumbly

### HARDNESS
- 8 Extremely hard
- 7 Very hard
- 6 Moderately hard
- 5 Slightly hard
- 4 Slightly soft
- 3 Moderately soft
- 2 Very soft
- 1 Extremely soft

### TEXTURE
- 8 Extremely coarse
- 7 Very coarse
- 6 Moderately coarse
- 5 Slightly coarse
- 4 Slightly fine
- 3 Moderately fine
- 2 Very fine
- 1 Extremely fine

### BEEF FLAVOR INTENSITY
- 8 Extremely intense
- 7 Very intense
- 6 Moderately intense
- 5 Slightly intense
- 4 Slightly bland
- 3 Moderately bland
- 2 Very bland
- 1 Extremely bland

### BEEF FLAVOR
- 8 Extremely characteristic beef flavor
- 7 Very characteristic beef flavor
- 6 Moderately characteristic beef flavor
- 5 Slightly characteristic beef flavor
- 4 Slightly uncharacteristic beef flavor
- 3 Moderately uncharacteristic beef flavor
- 2 Very uncharacteristic beef flavor
- 1 Extremely uncharacteristic beef flavor

### OFF-FLAVOR
- 5 Extremely Off-flavor
- 4 Very Off-Flavor
- 3 Moderate Off-Flavor
- 2 Slight Off-Flavor
- 1 None

### OFF-FLAVOR DESCRIPTORS
- 1 Metallic
- 2 Salty
- 3 Livery
- 4 Grassy
- 5 Bitter
- 6 Acidic
- 7 Bloody
- 8 Warmed Over Flavor

- 9 Rancid
- 10 Painty/Fishy
- 11 Oxidized
- 12 Other - Explain