

BREAKFAST

1
2
3
4
5

LUNCH

1
2
3
4
5

DINNER

1
2
3
4
5

SNACKS

1
2
3
4
5

DRINKS/BEVERAGES

1
2
3
4
5

EXERCISE: YES NO

COOK AT HOME: YES NO

1. What are some problem areas that you identified?

2. What are TWO things you are willing to change?

3. How will you change them?

1st CHANGE:

2ND CHANGE:
