

Student Name \_\_\_\_\_

Student # \_\_\_\_\_

### Food Lab Record Sheet

Record all of the foods and beverages that you consume on each day. In the columns on the right, mark how many servings you are getting from each food group. In the Total Servings row at the bottom of the chart, add up the total number of servings in each column to see if you met the daily recommendations. Complete a short summary at the end of each day. Submit the completed chart at the end of 7 days.

**Example:**

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>	2 pancakes w/syrup	2					1
	1 glass of orange juice			1			
	1 glass of milk				1		
	2 sausage links					1	

## Day 1:

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>Snacks</b>							
<b>Total Servings</b>							

### Day 1 Summary:

What areas were lacking in day 1? What are some things I can change tomorrow to help me improve my diet?

## Day 2:

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>Snacks</b>							
<b>Total Servings</b>							

### Day 2 Summary:

Were today's choices healthier choices than yesterday? Why or why not?

**Day 3:**

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>Snacks</b>							
<b>Total Servings</b>							

**Day 3 Summary:**

Which food group did I consistently eat proper amounts from? From which food group do I get the most calories and the fewest calories?

## Day 4:

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>Snacks</b>							
<b>Total Servings</b>							

### Day 4 Summary:

What areas were lacking in day 4? What are some things I can change tomorrow to help me improve my diet?

## Day 5:

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>Snacks</b>							
<b>Total Servings</b>							

### Day 5 Summary:

Were today's choices healthier choices than yesterday? Why or why not?

**Day 6:**

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>Snacks</b>							
<b>Total Servings</b>							

**Day 6 Summary:**

What areas were lacking in day 6? What are some things I can change tomorrow to help me improve my diet?

**Day 7:**

	What you ate?	Grain	Vegetable	Fruit	Dairy	Protein	Empty Calories
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>Snacks</b>							
<b>Total Servings</b>							

**Day 7 Summary:**

Which food group did I consistently eat proper amounts from during this week? From which food group do I get the most calories and the fewest calories? Over the next month, I plan to balance my diet with the following changes to achieve healthier eating habits.