

Date: _____

Tracking Sheets

Based on Your Face Sheet Your Goals are:	Tally your food choices from the food groups	Estimate your Total
Fruit ___ Cup(s) (1 cup is 1 cup raw or cooked fruit, ½ cup dried fruit or 1 cup 100% fruit juice)	_____ _____ _____	_____ cups
Vegetables ___ Cup(s) (1 cup is 1 cup raw or cooked vegetables, 2 cups leafy salad greens, or 1 cup 100% vegetable juice)	_____ _____ _____	_____ cups
Grains ___ Ounce equivalents (1 ounce equivalent is about 1 slice of bread, 1 ounce ready-to-eat cereal; or ½ cup cooked rice, pasta or cereal)	_____ _____ _____	_____ ounce equivalents
Meat ___ Ounces (1 ounce equivalent is 1 ounce lean meat, poultry, or seafood; 1 egg; 1 Tbsp. peanut butter; ¼ cup cooked beans or peas; or ½ ounce nuts or seeds)	_____ _____ _____	_____ ounce equivalents
Dairy ___ Cups (1 cup is 1 cup milk, yogurt, or fortified soy beverage; 1 ½ ounces natural cheese; or 2 ounces processed cheese)	_____ _____ _____	_____ cups
Be physically active for at least 150 minutes each week.	Some foods and drinks such as sodas, cakes, cookies, donuts, ice cream, and candy, are high in fats and sugars. Limit your intake of these.	_____ minutes

How did you do today? Great So-So Not so Great

My Objectives for tomorrow are: _____

My Activity Objectives for tomorrow are: _____

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