

# Food Journal

Day / Date: \_\_\_\_\_

Time	Food: What did you <u>want</u> to eat?	Food: What <u>did</u> you eat?	Amount	Location: (e.g., home, work, with friends, rest)	Rate your hunger / fullness (1-10)	Hydration: What did you drink? How much?	Emotions while eating: (e.g., nervous, angry, depressed)

Physical Activity: