Weekly Food and Behavior Diary

Date _____ End of Week Weight _____

Beginning of the Week Weight _____ **Total Weight Loss for Week** _____

Circle Days	Breakfast Lunch Dinner	Food Diary	Mid-Mor Mid-Aft Evening	Snack Diary	Minutes Spent Exercising
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	B		M		
	L		A		
	D		E		
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	B		M		
	L		A		
	D		E		
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	B		M		
	L		A		
	D		E		
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	B		M		
	L		A		
	D		E		
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	B		M		
	L		A		
	D		E		
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	B		M		
	L		A		
	D		E		
Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	B		M		
	L		A		
	D		E		

Additional Comments: