FOOD JOURNAL

Meal Duration Journal

Please complete the form below - entering your meals and duration for 1 FULL DAY.

Note the time in the 2 additional questions at the bottom of the page.

Please submit the completed form to Mandi Artino, by May 10, 2019.

NAME		DATE	
WHAT TIME DID YOU START EATING?	WHAT DIDYOU EAT?	WHAT TIME DID YOU STOP EATING?	

How long was your shortest meal?

How long was your longest meal?

What have you learned from this activity?