

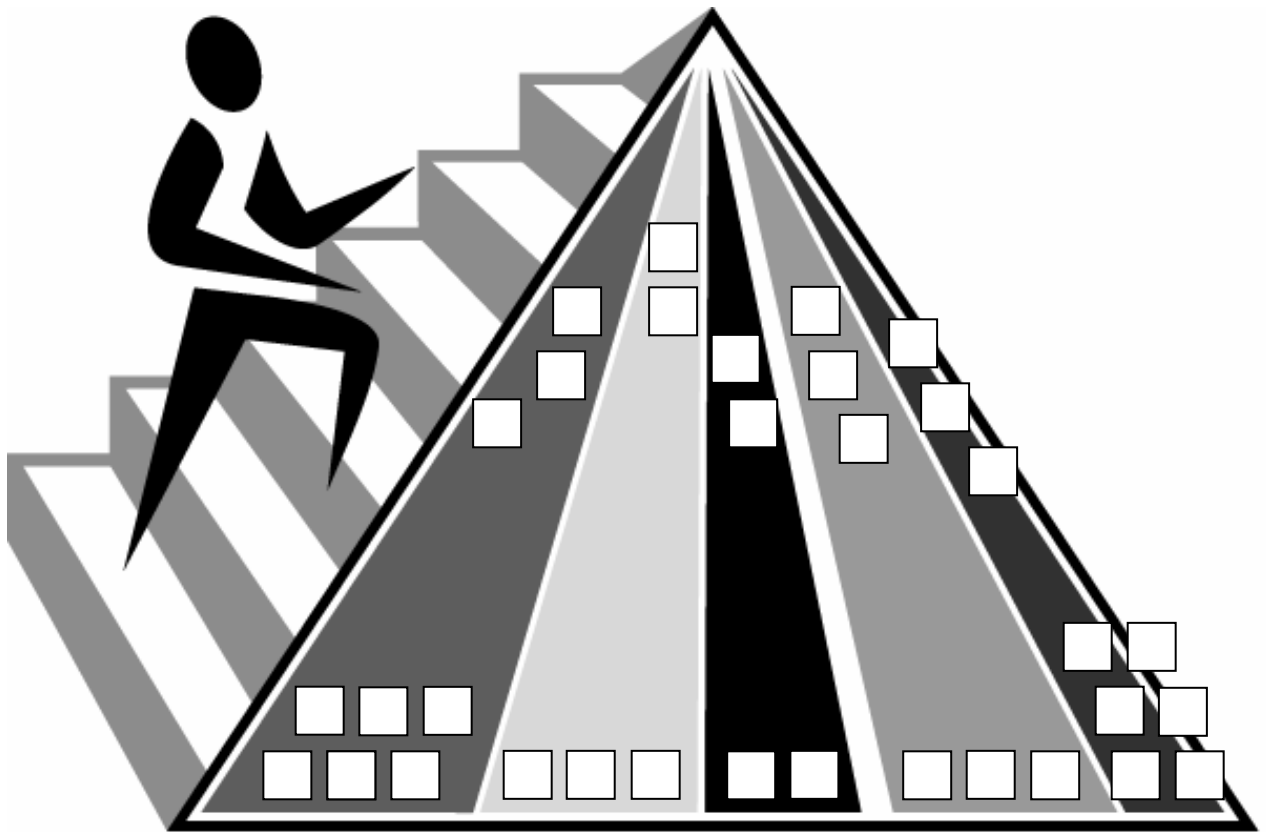
## MY PERSONAL FOOD PYRAMID

Name \_\_\_\_\_ Period \_\_\_\_ Assign #

Directions: Select one day from your **HEALTH HABIT DIARY** chart.

Count the number of servings of food you ate in each food group. Fill in one space for each serving equivalent (ounce or cup) you ate in each food group. Use squares at base or tip accordingly.	<b>FATS, OILS AND SWEETS Use Sparingly</b>
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Answer questions below based on a **2,000 calorie** plan or your own plan from MyPyramid



**Grains**  
6 Ounces

**Vegetables**  
2 1/2 Cups

**Fruits**  
2 Cups

**Milk**  
3 Cups

**Meat & Beans**  
5 1/2 Ounces

1. From which of the food groups are you getting at least a minimum number of servings?
2. Is there one or more food groups from which you are getting an excess number of servings? Identify the group or groups. Are you endangering your health by the excess from this group or groups?
3. From which food group or groups are you getting below the minimum number of servings? Identify the main nutrients these food groups supply. (Use Basic Nutrient Chart)
4. Which of your body's functions are you failing to provide with sufficient nutrients?