

Period _____ Name _____ Number _____

GOALS FOR DIETARY GUIDELINES

List the foods you ate yesterday--don't forget the snacks!

FOOD GROUP & NUMBER OF SERVINGS

[illegible]

You should have eaten the following number of servings.

How many servings did you eat?

BREAD GROUP	6-11 servings
VEGETABLE GROUP	3-5 servings
FRUIT GROUP	2-4 servings
MILK GROUP	3 servings
MEAT GROUP (ounces)	3 servings

On the back of this paper list ways to eat a more healthy diet.