

Food Life Style Check Sheet

~Let's review own diets~



Student ID _____ **Name** _____ (M • F)

Birth date YYYY / MM / DD / / /

☆ **Answer the questions below.**

1 Living with family No / Yes **2** Habitual exercise No / Yes [hours/ week]

3 Mark ○ the items below which you are interested in or you need advice.

- ① nutrition balance ② vegetable taking ③ meal for athlete
 ④ self-cooking ⑤ breakfast taking ⑥ day time snack
 ⑦ night snack ⑧ others [details:]

4 Describe your meals on the days with and without school in the table below.

	On-campus (ex. Weekdays)			Off-campus (ex. Weekends)		
	Menu (Ingredients)	Amt.	Select one	Menu (Ingredients)	Amt.	Select one
Break fast			Home Convenience store Dining out /co-op others			Home Convenience store Dining out /co-op others
Lunch			Home Convenience store Dining out /co-op others ()			Home Convenience store Dining out /co-op others ()
Dinner/ Supper			Home Convenience store Dining out /co-op others ()			Home Convenience store Dining out /co-op others ()
Snacks						
Alcohol						

Refer to the entry example on the back page.

Example

	On-campus (ex. Weekdays)			Off-campus (ex. Weekends)		
	Menu (Ingredients)	Amt.	Select one	Menu (Ingredients)	Amt.	Select one
Break fast	bread coffee	1 slice 1 cup	Home Convenience store Dining out /co-op others	rice soup(tomato, bacon) boiled egg	1 bowl 1 cup 1	Home Convenience store Dining out /co-op others
Lunch	rice hamburg steak salad (broccoli, lettuce) soup (onion, carrot, potato)	1 bowl 1 1 plate 1 cup	Home Convenience store Dining out /co-op others	meat sauce spaghetti salad (tomato, cucumber)	1 plate 1 plate	Home Convenience store Dining out /co-op others
Dinner	noodle (green onion, roasted pork) fried mashed potato		Home Convenience store Dining out /co-op others	rice vegetable stir fry (cabbage, carrot, pork) deep fried chicken	1 bowl 1 plate 2	Home Convenience store Dining out /co-op others
Snack	chocolate	1 pack		potato chips	1 pack	
Alcohol				beer	350ml	

