Food Awareness Journal

Please fill out this journal as per instructions from your practitioner.

Date:		F	Please circle	day:	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
Water Consumption (1 glass or 250ml):												
	Please record ALL food and drinks consumed over the 24 hour period. The more honest you are with yourself the more you will get out of this process. There is no wrong or right answer.											
	Time	Place	Food or drink	eaten			How much	Reasons	for Eati	ng?		
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	Reasons for eating: social occasion, celebration, boredom, hungry, eating out, at the shops, with a friend, morning/afternoon tea, family meal, no other options, unorganised, tired, emotional											
What I learnt from today: Were there particular times, places, situations or moods that triggered unhelpful eating behaviours today?												
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(Questions for your practitioner: Write down any questions you have to discuss at your next appointment.											
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