

Date ____ / ____ / ____

Wake time plan: _____ Wake time actual: _____ Hours of sleep _____ Quality of sleep _____

Y	N	Did I...
		Weigh/BF% in AM?
		Get to bed on time?
		Get enough sleep?
		Think about my food in the morning?
		Plan today's menu?
		Write down the nutrient value of today's menu?
		Pack my food?
		Plan my exercise?
		Prep my food?
		Exercise aerobically?
		Exercise anaerobically?
		Time my meals?
		Take my vitamins?
		Take my supplements?
		Drink enough water?
		Suffer hunger?
		Weigh/BF% in PM?

Daily food plan		
Protein grams:	Carb grams:	Fat grams:
Protein calories:	Carb calories:	Fat calories:
Morning beverage:		
Morning snack:		

Time:	Protein	Carbs	Fat	Total daily calories
Plan:	G	G	G	
	Cal	Cal	Cal	
	D%	D%	D%	
Add this line to the box above	Tdc	Tdc	Tdc	

Time:	Protein	Carbs	Fat	Total daily calories
Plan:	G	G	G	
	Cal	Cal	Cal	
	D%	D%	D%	
Add this line to the box above	Tdc	Tdc	Tdc	

Time:	Protein	Carbs	Fat	Total daily calories
Plan:	G	G	G	
	Cal	Cal	Cal	
	D%	D%	D%	
Add this line to the box above	Tdc	Tdc	Tdc	

Time:	Protein	Carbs	Fat	Total daily calories
Plan:	G	G	G	
	Cal	Cal	Cal	
	D%	D%	D%	
Add this line to the box above	Tdc	Tdc	Tdc	

Time:	Protein	Carbs	Fat	Total daily calories
Plan:	G	G	G	
	Cal	Cal	Cal	
	D%	D%	D%	
Add this line to the box above	Tdc	Tdc	Tdc	

4 AM
5 AM
6 AM
7 AM
8 AM
9 AM
10 AM
11 AM
12 PM
1 PM
2 PM
3 PM
4 PM
5 PM
6 PM
7 PM
8 PM
9 PM
10 PM
11 PM
12 AM
1 AM
2 AM
3 AM

Notes: _____

Bedtime plan _____ Bedtime actual _____ Daily grade (A-F) _____