

**MY ASSESSMENT**

Review your Nutrition Tracker and check the box that reflects how often you ate from each of the Five Food Groups.

	Rarely 0-2 days a week	Sometimes 3-4 days a week	Frequently 5-6 days a week	Always 7 days a week
Dairy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protein	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reflect on your typical food and drink choices and check the box that reflects how often you made each of the choices below.

	Rarely 0-2 days a week	Sometimes 3-4 days a week	Frequently 5-6 days a week	Always 7 days a week
I consume empty-calorie foods and/or drinks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I consume nutrient-dense foods and/or drinks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I consume an adequate amount of water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Review your Physical Activity Tracker and check the box that reflects how often you get 60 minutes of physical activity each day.

	Rarely 0-2 days a week	Sometimes 3-4 days a week	Frequently 5-6 days a week	Always 7 days a week
I get 60 minutes of physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I participate in bone/muscle strengthening activities at least 3 days a week. ☐ No ☐ Yes

I participate in heart healthy activities at least 5 days a week. ☐ No ☐ Yes



MY ASSESSMENT

My Overall Fuel Up Rating

When it comes to fueling my body for optimal performance, I feel I am doing a(n)

☐

Poor Job

☐

Ok Job

☐

Good Job

☐

Fantastic Job

My Overall Physical Activity Rating

When it comes to getting enough physical activity, I feel I am doing a(n)

☐

Poor Job

☐

Ok Job

☐

Good Job

☐

Fantastic Job

My Fuel Up and Physical Activity Assessment

Review your nutrition and physical activity tracker. Identify two healthy choices that you made this week.

Healthy Choices I Made this Week

1.

2.

Review your nutrition and physical activity tracker. Think of two healthy choices that you would like to try next week that will help you to create a healthy habit.

Healthy Choices I Would Like to Try

1.

This could be hard for me because...

My plan to overcome this is...

2.

This could be hard for me because...

My plan to overcome this is...

