

E.1b Child Food Diary Child Care Day (English)

Thank you for agreeing to be part of the Study of Nutrition and Activity in Child Care Settings. As we explained when you signed up for the study, parents are being asked to complete this Child Food Diary.

About this Diary: The Child Food Diary will take approximately 30 minutes to complete. The Child Food Diary will gather information about everything your child had to eat and drink for the time frame indicated on the first page of this diary. This will include food preparation details and portion sizes on all foods and drinks.

Everything you report in the food diary will be kept private and used for research purposes according to state and federal law. We will not include your name or your child's name in any of our reports - we will be reporting overall results for all children and parents participating in the study.

Questions. If you have any questions about the study please call our toll-free study number at 1- 844-808-4777 or email SNACS@abtassoc.com. We will be happy to answer your questions and to help you in any way we can. For questions or concerns about your rights as a research participant, call Teresa Doksum at the Abt Associates Institutional Review Board at toll-free 877-520-6835.

Thank you for participating in the Study of Nutrition and Activity in Child Care Settings (SNACS).

Food diary for the day your child attends child care

Please write down EVERYTHING your child eats and drinks from the moment he/she leaves the child care center today, until she/he arrives at the center tomorrow morning (or the designated time to stop recording on the front cover of this booklet). **Please remember to include all food and beverages your child has tomorrow before going to child care!**

Include all meals, snacks, tastes, and bites of food and all drinks, including water. Keep this booklet with you and write down items immediately after each meal and snack. **If your child is going to be in the care of someone else after leaving child care, please ask them to keep note of what food and drinks your child consumes for you to record in this booklet.** There are no right or wrong answers; we just want to know what your child ate. Don't include foods that your child leaves on his/her plate; we only want to know what he/she ate. Please write only one food per line. Please write neatly and record as much information about the foods and meals as you can. **Thank you for your help in this important project!**

We have included portion estimators and pictures at the back of this booklet. Please use them to help you estimate the portion size of what he/she ate OR you can use standard measuring tools that may be available in the kitchen (measuring cups/spoons, food scales). We have also included examples of the correct ways to record meals and mixed dishes opposite from every meal tab.

When you write down each food and drink on the form, please remember the following:

- Did you write down the brand of the food (if it was store bought)?
- Did you include details about the type of food? (e.g. low fat, whole grain, reduced salt)
- Did you include any additions to a food? (e.g. ketchup on a sandwich, gravy on meat, milk on cereal, butter or margarine on bread)
- Did you use appropriate numbers and measurements? (e.g. fun-size candy bar, 1 oz bag of chips, ½ cup of milk)
- Did you write down how the food was prepared? (e.g. baked chicken, raw broccoli, breaded and fried chicken nuggets)
- Did you describe mixed dishes? (e.g. casseroles, soups, salads).

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PACKED MEALS/SNACKS

Please use portion estimators and pictures in the back of this booklet to help you estimate the amounts prepared.

If you brought a meal for your child to eat at child care TODAY, please record that information here:

MEAL OR SNACK EXAMPLE:

What TYPE of meal is this? (check one) <input type="checkbox"/> Breakfast <input checked="" type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Snack		
WHAT did you pack for your child to eat? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add</u> anything to the food?	HOW MUCH did you pack for your child? (cups, oz, inches)
Sandwich	See Mixed Dish details below	½ a full sandwich
Apple slices	Fresh without the skin	4 slices
chips	Baked Lays original	1 single serve bag (1 oz)
water		8 oz water bottle

MIXED DISH EXAMPLE:

MIXED DISH NAME: Sandwich (use the same name as you wrote it in the meal above)

What foods are in this dish?

- Deli turkey meat, 2 thin slices
- American cheese, 1/2 slice
- mustard
- 100% whole wheat Nature's Own Bread, 1 slice

Date of meal brought to child care: ___/___/2016 Day (circle one): M T W Th F

MEAL OR SNACK:

What TYPE of meal is this? (check one) <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Snack		
WHAT did you pack for your child to eat? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add</u> anything to the food?	HOW MUCH did you pack for your child? (cups, oz, inches)

MIXED DISH NAME: _____ (use the same name as you wrote it in the meal above)

What foods are in this dish?

_____	_____
_____	_____
_____	_____

MEAL OR SNACK:

What TYPE of meal is this? (check one) <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Snack		
WHAT did you pack for your child to eat? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add</u> anything to the food?	HOW MUCH did you pack for your child? (cups, oz, inches)

MIXED DISH NAME: _____ (use the same name as you wrote it in the meal above)

What foods are in this dish?

_____	_____
_____	_____
_____	_____

BLANK

MEAL OR SNACK #1

Please use portion estimators and pictures in the back of this booklet to help you estimate the amounts eaten.

Instructions and examples of the correct way to record a meal and mixed dish:

When you write down each food and drink on the form, please remember the following:

- Did you write down the brand of the food (if it was store bought)?
- Did you include details about the type of food? (e.g. low fat, whole grain, reduced salt)
- Did you include any additions to a food? (e.g. ketchup on a sandwich, gravy on meat, milk on cereal, butter or margarine on bread)
- Did you use appropriate numbers and measurements? (e.g. fun-size candy bar, 1 oz bag of chips, ½ cup of milk)
- Did you write down how the food was prepared? (e.g. baked chicken, raw broccoli, breaded and fried chicken nuggets)
- Did you describe mixed dishes? (e.g. casseroles, soups, salads).

MEAL OR SNACK EXAMPLE:

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input checked="" type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	06 : 30 (check one) <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add</u> anything to the food?	HOW MUCH did your child eat or drink? (cups, oz, inches)
Pasta casserole	See Mixed Dish details below	1 cup
Garlic bread	Pepperidge Farm Garlic Texas Toast from frozen	1 piece (1x 2 inches, ½ inch thick)
Broccoli	Steamed with added butter and salt	¼ cup
Milk	2% white milk	½ cup
Cupcake	Little Debbie chocolate cupcake, cream filled	¼ cupcake

This is correct because it gave lots of detail and we know exactly how much your child ate.

MIXED DISH EXAMPLE:

What is the name of the dish you wrote above (use the same name as you wrote it in the meal above)?

_____ pasta casserole _____

What foods are in this dish?

_____ White elbow macaroni _____

_____ Mozzarella cheese - part skim _____

_____ 85% fat ground beef _____

_____ Green peppers - fresh _____

_____ Canned diced tomatoes _____

Meal or Snack #1

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	____ : ____ (check one) <input type="checkbox"/> am <input type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the brand? How was it prepared? What was the flavor or type?	HOW MUCH did your child eat or drink? (cups, oz, inches)

 If you listed any mixed dishes in the meals eaten above, please tell us more about them in the spaces below. The more information you can provide, the better, but you don't need to write out the recipe. It is ok to include more than one mixed dish.

1. What is the name of the mixed dish you wrote above?

2. What is the name of the dish you wrote above?

What foods are in this dish?

What foods are in this dish?

Continue to next page or go to pink page at end if no more meals or snacks.

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MEAL OR SNACK #2

Please use portion estimators and pictures in the back of this booklet to help you estimate the amounts eaten.

Instructions and examples of the correct way to record a meal and mixed dish:

When you write down each food and drink on the form, please remember the following:

- Did you write down the brand of the food (if it was store bought)?
- Did you include details about the type of food? (e.g. low fat, whole grain, reduced salt)
- Did you include any additions to a food? (e.g. ketchup on a sandwich, gravy on meat, milk on cereal, butter or margarine on bread)
- Did you use appropriate numbers and measurements? (e.g. fun-size candy bar, 1 oz bag of chips, ½ cup of milk)
- Did you write down how the food was prepared? (e.g. baked chicken, raw broccoli, breaded and fried chicken nuggets)
- Did you describe mixed dishes? (e.g. casseroles, soups, salads).

MEAL OR SNACK EXAMPLE:

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input checked="" type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	06 : 30 (check one) <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add anything to the food</u> ?	HOW MUCH did your child eat or drink? (cups, oz, inches)
Pasta casserole	See Mixed Dish details below	1 cup
Garlic bread	Pepperidge Farm Garlic Texas Toast from frozen	1 piece (1x 2 inches, ½ inch thick)
Broccoli	Steamed with added butter and salt	¼ cup
Milk	2% white milk	½ cup
Cupcake	Little Debbie chocolate cupcake, cream filled	¼ cupcake

This is correct because it gave lots of detail and we know exactly how much your child ate.

MIXED DISH EXAMPLE:

What is the name of the dish you wrote above (use the same name as you wrote it in the meal above)?

_____ pasta casserole _____

What foods are in this dish?

_____ White elbow macaroni _____

_____ 85% fat ground beef _____

_____ Mozzarella cheese - part skim _____

_____ Green peppers - fresh _____

_____ Canned diced tomatoes _____

Meal or Snack #2

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	____ : ____ (check one) <input type="checkbox"/> am <input type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the brand? How was it prepared? What was the flavor or type?	HOW MUCH did your child eat or drink? (cups, oz, inches)

 If you listed any mixed dishes in the meals eaten above, please tell us more about them in the spaces below. The more information you can provide, the better, but you don't need to write out the recipe. It is ok to include more than one mixed dish.

1. What is the name of the mixed dish you wrote above?

2. What is the name of the dish you wrote above?

What foods are in this dish?

What foods are in this dish?

Continue to next page or go to pink page at end if no more meals or snacks.

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MEAL OR SNACK #3

Please use portion estimators and pictures in the back of this booklet to help you estimate the amounts eaten.

Instructions and examples of the correct way to record a meal and mixed dish:

When you write down each food and drink on the form, please remember the following:

- Did you write down the brand of the food (if it was store bought)?
- Did you include details about the type of food? (e.g. low fat, whole grain, reduced salt)
- Did you include any additions to a food? (e.g. ketchup on a sandwich, gravy on meat, milk on cereal, butter or margarine on bread)
- Did you use appropriate numbers and measurements? (e.g. fun-size candy bar, 1 oz bag of chips, ½ cup of milk)
- Did you write down how the food was prepared? (e.g. baked chicken, raw broccoli, breaded and fried chicken nuggets)
- Did you describe mixed dishes? (e.g. casseroles, soups, salads).

MEAL OR SNACK EXAMPLE:

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input checked="" type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	06 : 30 (check one) <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add anything to the food</u> ?	HOW MUCH did your child eat or drink? (cups, oz, inches)
Pasta casserole	See Mixed Dish details below	1 cup
Garlic bread	Pepperidge Farm Garlic Texas Toast from frozen	1 piece (1x 2 inches, ½ inch thick)
Broccoli	Steamed with added butter and salt	¼ cup
Milk	2% white milk	½ cup
Cupcake	Little Debbie chocolate cupcake, cream filled	¼ cupcake

This is correct because it gave lots of detail and we know exactly how much your child ate.

MIXED DISH EXAMPLE:

What is the name of the dish you wrote above (use the same name as you wrote it in the meal above)?

_____ pasta casserole _____

What foods are in this dish?

_____ White elbow macaroni _____

_____ Mozzarella cheese - part skim _____

_____ 85% fat ground beef _____

_____ Green peppers - fresh _____

_____ Canned diced tomatoes _____

Meal or Snack #3

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	____ : ____ (check one) <input type="checkbox"/> am <input type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the brand? How was it prepared? What was the flavor or type?	HOW MUCH did your child eat or drink? (cups, oz, inches)

 If you listed any mixed dishes in the meals eaten above, please tell us more about them in the spaces below. The more information you can provide, the better, but you don't need to write out the recipe. It is ok to include more than one mixed dish.

1. What is the name of the mixed dish you wrote above?

2. What is the name of the dish you wrote above?

What foods are in this dish?

What foods are in this dish?

Continue to next page or go to pink page at end if no more meals or snacks.

BLANK

MEAL OR SNACK #4

Please use portion estimators and pictures in the back of this booklet to help you estimate the amounts eaten.

Instructions and examples of the correct way to record a meal and mixed dish:

When you write down each food and drink on the form, please remember the following:

- Did you write down the brand of the food (if it was store bought)?
- Did you include details about the type of food? (e.g. low fat, whole grain, reduced salt)
- Did you include any additions to a food? (e.g. ketchup on a sandwich, gravy on meat, milk on cereal, butter or margarine on bread)
- Did you use appropriate numbers and measurements? (e.g. fun-size candy bar, 1 oz bag of chips, ½ cup of milk)
- Did you write down how the food was prepared? (e.g. baked chicken, raw broccoli, breaded and fried chicken nuggets)
- Did you describe mixed dishes? (e.g. casseroles, soups, salads).

MEAL OR SNACK EXAMPLE:

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input checked="" type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	06 : 30 (check one) <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add anything to the food</u> ?	HOW MUCH did your child eat or drink? (cups, oz, inches)
Pasta casserole	See Mixed Dish details below	1 cup
Garlic bread	Pepperidge Farm Garlic Texas Toast from frozen	1 piece (1x 2 inches, ½ inch thick)
Broccoli	Steamed with added butter and salt	¼ cup
Milk	2% white milk	½ cup
Cupcake	Little Debbie chocolate cupcake, cream filled	¼ cupcake

This is correct because it gave lots of detail and we know exactly how much your child ate.

MIXED DISH EXAMPLE:

What is the name of the dish you wrote above (use the same name as you wrote it in the meal above)?

_____ pasta casserole _____

What foods are in this dish?

_____ White elbow macaroni _____

_____ Green peppers - fresh _____

_____ 85% fat ground beef _____

_____ Canned diced tomatoes _____

_____ Mozzarella cheese - part skim _____

Example

Meal or Snack #4

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	____ : ____ (check one) <input type="checkbox"/> am <input type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the brand? How was it prepared? What was the flavor or type?	HOW MUCH did your child eat or drink? (cups, oz, inches)

 If you listed any mixed dishes in the meals eaten above, please tell us more about them in the spaces below. The more information you can provide, the better, but you don't need to write out the recipe. It is ok to include more than one mixed dish.

1. What is the name of the mixed dish you wrote above?

2. What is the name of the dish you wrote above?

What foods are in this dish?

What foods are in this dish?

Continue to next page or go to pink page at end if no more meals or snacks.

BLANK

MEAL OR SNACK #5

Please use portion estimators and pictures in the back of this booklet to help you estimate the amounts eaten.

Instructions and examples of the correct way to record a meal and mixed dish:

When you write down each food and drink on the form, please remember the following:

- Did you write down the brand of the food (if it was store bought)?
- Did you include details about the type of food? (e.g. low fat, whole grain, reduced salt)
- Did you include any additions to a food? (e.g. ketchup on a sandwich, gravy on meat, milk on cereal, butter or margarine on bread)
- Did you use appropriate numbers and measurements? (e.g. fun-size candy bar, 1 oz bag of chips, ½ cup of milk)
- Did you write down how the food was prepared? (e.g. baked chicken, raw broccoli, breaded and fried chicken nuggets)
- Did you describe mixed dishes? (e.g. casseroles, soups, salads).

MEAL OR SNACK EXAMPLE:

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input checked="" type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input checked="" type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	06 : 30 (check one) <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the <u>brand</u> ? How was it <u>prepared</u> ? What was the <u>flavor</u> or type? Did you <u>add anything to the food</u> ?	HOW MUCH did your child eat or drink? (cups, oz, inches)
Pasta casserole	See Mixed Dish details below	1 cup
Garlic bread	Pepperidge Farm Garlic Texas Toast from frozen	1 piece (1x 2 inches, ½ inch thick)
Broccoli	Steamed with added butter and salt	¼ cup
Milk	2% white milk	½ cup
Cupcake	Little Debbie chocolate cupcake, cream filled	¼ cupcake

This is correct because it gave lots of detail and we know exactly how much your child ate.

MIXED DISH EXAMPLE:

What is the name of the dish you wrote above (use the same name as you wrote it in the meal above)?

_____ pasta casserole _____

What foods are in this dish?

_____ White elbow macaroni _____

_____ Green peppers - fresh _____

_____ 85% fat ground beef _____

_____ Canned diced tomatoes _____

_____ Mozzarella cheese - part skim _____

Example

Meal or Snack #5

What TYPE of meal is this? (check one)	WHERE was this meal eaten? (check one)	What TIME was this meal eaten?
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack	<input type="checkbox"/> Home <input type="checkbox"/> Traveling (car, bus, etc) <input type="checkbox"/> Other person's house <input type="checkbox"/> Party or other social event <input type="checkbox"/> Restaurant/deli/fast food (Name?) _____ <input type="checkbox"/> Other (please describe) _____	____ : ____ (check one) <input type="checkbox"/> am <input type="checkbox"/> pm
WHAT did your child eat or drink? (list one item per line)	DESCRIBE the item completely. What is the brand? How was it prepared? What was the flavor or type?	HOW MUCH did your child eat or drink? (cups, oz, inches)

 If you listed any mixed dishes in the meals eaten above, please tell us more about them in the spaces below. The more information you can provide, the better, but you don't need to write out the recipe. It is ok to include more than one mixed dish.

1. What is the name of the mixed dish you wrote above?

2. What is the name of the dish you wrote above?

What foods are in this dish?

What foods are in this dish?

Continue to next page or go to pink page at end if no more meals or snacks.

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Please answer the first 3 questions, thinking about your child.

1. Think about the amount of food your child ate TODAY, how does this amount compare to what your child usually eats? Would you say this was: (check one)
- A lot more (please answer question 1a)
 - Close to usual
 - A lot less (please answer question 1a)

1a. If a **lot more** or a **lot less**, why? _____

2. Is your child on a special diet?
- Yes, diet for weight loss
 - Yes, diet for weight gain
 - Yes, other medical needs (please answer question 2a)
 - No

2a. If other medical needs, please describe. _____

3. Does your child have a food allergy?
- Yes (please answer question 3a)
 - No

3a. If yes, what food(s) is your child allergic to? _____

Please answer the next 3 questions, thinking about how you USUALLY prepare food.

1. Do you use salt when preparing food? (check one)
- Yes, always
 - Yes, occasionally
 - We use a salt alternative
 - Never




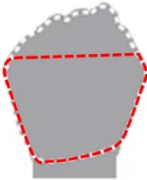

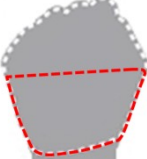










2. What type of fat do you use *most often* when **baking** at home? (check one)

- | | |
|---|---|
| <input type="checkbox"/> Butter | <input type="checkbox"/> Canola oil |
| <input type="checkbox"/> Margarine | <input type="checkbox"/> Olive oil |
| <input type="checkbox"/> Animal fat or lard | <input type="checkbox"/> Vegetable oil |
| <input type="checkbox"/> Crisco | <input type="checkbox"/> Other oil or fat _____ |

3. What type of fat do you use *most often* to **fry or sauté** food at home? (check one)

- | | |
|---|---|
| <input type="checkbox"/> Butter | <input type="checkbox"/> Canola oil |
| <input type="checkbox"/> Margarine | <input type="checkbox"/> Olive oil |
| <input type="checkbox"/> Animal fat or lard | <input type="checkbox"/> Vegetable oil |
| <input type="checkbox"/> Crisco | <input type="checkbox"/> Other oil or fat _____ |

BLANK

SERVING SIZE	FOODS	VISUAL AIDE	HAND SYMBOL
1 cup	Rice Pasta Fruit Veggies	Baseball 	1 Fist 
3/4 cup	Rice Pasta Fruit Veggies	Tennis Ball 	$\frac{3}{4}$ Fist 
1/2 cup	Rice Pasta Fruit Veggies	Light Bulb 	$\frac{1}{2}$ Fist 
3 ounces	Meat Fish Poultry	Deck of Cards 	Palm 
1 ounce	Nuts Dried Fruit (e.g. raisins)	1 Handful 	1 Handful 
1 ounce	Chips Popcorn Pretzels	2 Handfuls 	2 Handfuls 
2 tablespoons	Peanut Butter Cheese	Golf Ball 	2 Thumbs 
1 tablespoon	Peanut Butter Cheese	$\frac{1}{2}$ Golf Ball 	1 Thumb 

1
teaspoon

Cooking Oil
Mayonnais
e
Butter
Sugar

4
Stacked
Dimes



Thumb
Tip

