



Healthy Eating Challenge

Sample Tracking Sheet

Use a check mark ✓ to indicate each activity completed.

Week 1	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
CHALLENGE							

Week 2	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
CHALLENGE							

Week 3	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
CHALLENGE							

Week 4	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
CHALLENGE							

Total Challenges Completed: _____

NAME: _____

DEPT: _____