

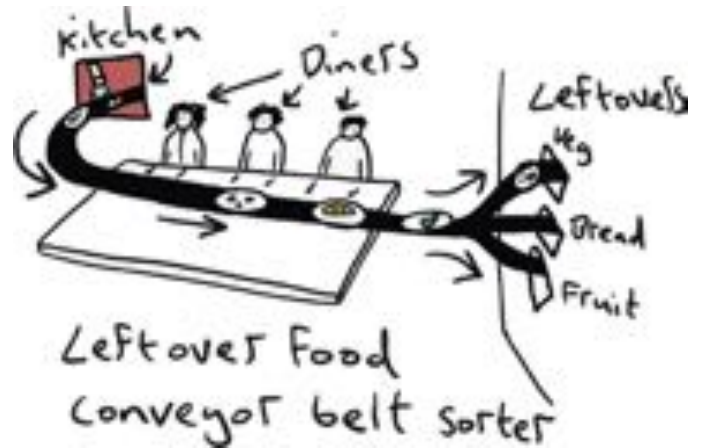
Food Waste Challenge

A day in the life

Name:

Date:

Place:



My food day...	What I had to eat	Did I waste any?
Breakfast		
Morning snack		
Lunch		
Afternoon snack		
Tea / Dinner		

My favourite food today was...

When am I most likely to waste food?