

Food Diary

Please fill in the food diary as accurately as possible to give a guide to your typical diet. Include a working day and a day off with times of eating and drinking. Please also note any exercise taken. Put down approximate portion sizes and any physical symptoms you felt during the day.

Once you have completed the questionnaire, please sign:

Date

Date:	Food and Drink consumed	Symptom
Time am /pm		
: Date	: Food and Drink consumed	Symptom
Time		
Date Time	Food and Drink consumed	Symptom

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