

# Self-Monitoring Form

Date \_\_\_\_\_

Time	Food/Beverage Consumed with Portion Size	Level of Hunger Pre-Meal <small>(1 to 5)</small> 1 = Famished, Irritable 2 = Very Hungry 3 = Hungry 4 = Slight Hunger 5 = Neutral	Level of Fullness Post-Meal <small>(6 to 10)</small> 6 = Appetite Goes Away 7 = Satisfied 8 = Full 9 = Overfull, Stuffed 10 = Sick, Discomfort	Self-Talk/Food Rules/ Rationalizations/Emotions

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