



Healthy Meetings for Wellness Pre-Checklist

Thinking back to the last meeting you attended, please complete the questions below:

1. How long was the meeting? _____ Hour(s) _____ Minutes
2. How many people attended the meeting? _____ People
3. Were the following foods and beverages **available** at the meeting? Please check (✓) yes, no, or don't know.

Foods and Beverages Available at the Meeting	Yes	No	Don't Know
Water			
Fruits and/or vegetables			
Whole grain foods such as 100% whole grain bread, 100% whole grain crackers, brown rice			
High sugar or high fat foods such as chips, regular soda, pastry			
Reduced fat/sugar/salt foods such as non-fat dip, diet soda, low-sodium crackers			

Please respond to the following statements by placing a check (✓) in the box that best applies to you:

Statements	Not sure if this applies to me	Does not apply to me at all	Applies to me some of the time	Applies to me most of the time	I do this all of the time
I eat half of my grains as whole grains.					
I eat fruits and/or vegetables at every eating occasion.					
I choose lower-fat foods whenever possible.					
I choose lower-calorie foods whenever possible.					
I drink 6-8 cups of water throughout the day.					
I wash my hands before handling food or eating.					
I keep <i>hot</i> foods <i>hot</i> and <i>cold</i> foods <i>cold</i> .					
I am physically active for 30 minutes.					

