## Food Likes and Dislikes Questionnaire

Please cross out any foods you would prefer not to eat or would not buy at the grocery store. Dairy

| Skim milk | $1 \%$ milk | $2 \%$ milk | Chocolate milk |
| :--- | :--- | :--- | :--- |
| Soy milk | Plain low-fat yogurt | Fruited low-fat yogurt | Cottage cheese |
| Swiss cheese | Cheddar cheese | Grated cheese | Soy cheese |
| Other: |  |  |  |

## Protein

| Beef | Chicken | Turkey | Fish |
| :--- | :--- | :--- | :--- |
| Pork | Ham | Bacon | Sausage |
| Eggs | Tuna fish | Peanut butter | Shrimp |
| Soy meat | Black beans | Garbanzo beans | Kidney bean |
| Other: |  |  |  |

## Starch

| Bagel | Pancakes | Corn | Brown or Wild rice |
| :--- | :--- | :--- | :--- |
| English muffin | Waffles | Potatoes | Pasta |
| Whole Wheat bread | French toast | Peas | Popcorn |
| Pita bread | Granola | Sweet potato | Pretzels |
| Crackers | Winter Squash | Flat bread | French fries |
| Dinner roll | Taco shells | Quinoa | Barley |
| Cereal (hot and cold): |  |  |  |
| Chips (potato, tortilla, etc): |  |  |  |
| Other: |  |  |  |

## Fruits

| Apple | Blueberries | Peaches | Apple juice |
| :--- | :--- | :--- | :--- |
| Applesauce | Cantaloupe | Pears | Orange juice |
| Banana | Watermelon | Strawberries | Grape juice |
| Orange | Muskmelon | Mango | Mixed berry juice |
| Mandarin orange | Pineapple | Dried fruit | Cranberry juice |
| Grapes | Plum | Canned fruit | Frozen fruit |
| Other: |  |  |  |

## Vegetables

| Asparagus | Cucumber | Mushroom | Iceberg lettuce |
| :--- | :--- | :--- | :--- |
| Cauliflower | Green beans | Sweet peppers | Romaine lettuce |
| Broccoli | Brussels sprouts | Mixed vegetables | Leaf lettuce |
| Celery | Onion | Roasted vegetables | Spinach |
| Carrots | Tomato | Oriental vegetables | Beets |
| Other: |  |  |  |

## Condiments and dressings

| Butter | Creamy salad <br> dressing | Salsa | Olive Oil |
| :--- | :--- | :--- | :--- |
| Margarine | Italian salad <br> dressing | Guacamole | Hummus |
| Cream cheese | Spaghetti sauce | Sour cream | Canola Oil |
| Other: |  |  |  |

## Favorite Restaurants and Menu Selections

List your top three restaurants and/or menu selections:

1. $\qquad$
2. $\qquad$
3. $\qquad$

Please list any additional information about your food preferences that you think would help:

## Diet History and Food Frequency

| Current Diet: |  |
| ---: | ---: |
| Previous Diets: |  |
| How many meals per day: |  |
| How many times per week do you <br> eat at restaurants, take-out or fast-food: |  |
| What is your typical <br> eating environment: |  |
| What are your favorite foods: |  |
| What foods will you not eat: |  |
| What foods do you <br> have cravings for: <br> How is your diet <br> affected by stress: |  |
| Who prepares meals at home: |  |
| Who does the grocery shopping: |  |


|  | Estimated Servings per Day | Estimated Servings per Week |
| ---: | ---: | ---: |
| Bread, cereal, pasta, rice, grains |  |  |
| Fruit |  |  |
| Vegetables |  |  |
| Milk, cheese, yogurt |  |  |
| Meat, poultry, fish, eggs |  |  |
| Lentils, beans, tofu |  |  |
| Peanut butter, nuts |  |  |
| Fats |  |  |
| Oils |  |  |
| Fried foods |  |  |
| Snack foods |  |  |
| Desserts |  |  |
| Sweetened beverages |  |  |
| $100 \%$ fruit juice |  |  |
| Water |  |  |
| Caffeinated beverages |  |  |
| Sports drinks |  |  |

