

APPENDIX- IV

Food Behaviour Checklist

Name:

Std:

School:

Sr. no.	Food & life style pattern	Day(0- 7) (specify)
1.	Breakfast: (1) Yes (2) No	
2.	Breakfast Options: milk, tea, milk/cereal, cereal/veg, milk/cereal/veg etc.	
3.	Mid morning: (1) Yes (2) No	
4.	Mid morning Options: cereal, cereal/veg, cereal/pulse/milk product, etc.	
5.	Vegetables: (1) Yes (2) No	
6.	Vegetables: GLV'S,	
7	Vegetables: Yellow and Orange veg. like pumpkin, carrot	
8.	Vegetables: Roots & tubers like potato, onion etc.	
9.	Vegetables: Other veg. like lady finger, cauliflower, brinjal, bottle gourd(doodhi) etc.	
10	Fruits: (1) Yes (2) No	
11	Local fruits: wood apple, guava, bor, etc.	
12	Evening Snacks: (1) Yes (2) No	
13	Evening Snacks options: namkeen and farsan	
14.	Evening Snacks options: Biscuits and bakery products like bread, puff etc.	
Sr. no.	Food & life style pattern	Day(0- 7) (specify)

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15.	Outside foods: Pav bhaji, Punjabi, Chinese, fast foods etc.	
16.	Carry lunch to school: 1) Yes (2) No	
17	Have MDM : 1) Yes (2) No	
18	Water Intake (Frequency)	_____ glasses.
19	Activity: Playtime in school and home (Daily):	_____ minutes
20	Activity: Leisure time (watching TV, computer games, video games etc.) (Daily)	_____ minutes
21	Activity: Study time (Daily)	_____ minutes