



WEEKLY MENU PLAN

WEEK OF:	MONTH	DAY
-----------------	-------	-----



CAMPUS HEALTH

You have permission to eat satisfying foods

DINNER	NOT DINNER
SUNDAY <input type="checkbox"/> DINE IN <input type="checkbox"/> DINE OUT <input type="checkbox"/> TAKEOUT	BREAKFASTS
MONDAY <input type="checkbox"/> DINE IN <input type="checkbox"/> DINE OUT <input type="checkbox"/> TAKEOUT	
TUESDAY <input type="checkbox"/> DINE IN <input type="checkbox"/> DINE OUT <input type="checkbox"/> TAKEOUT	
	LUNCHES
WEDNESDAY <input type="checkbox"/> DINE IN <input type="checkbox"/> DINE OUT <input type="checkbox"/> TAKEOUT	
THURSDAY <input type="checkbox"/> DINE IN <input type="checkbox"/> DINE OUT <input type="checkbox"/> TAKEOUT	
	SNACKS
FRIDAY <input type="checkbox"/> DINE IN <input type="checkbox"/> DINE OUT <input type="checkbox"/> TAKEOUT	
SATURDAY <input type="checkbox"/> DINE IN <input type="checkbox"/> DINE OUT <input type="checkbox"/> TAKEOUT	