

Food Waste Audit Tracking Sheet

Week 1

Volume:			
DAY	Type of food	# of FULL containers	Notes/ Reasons Why
1 Day of Week:			
2 Day of Week:			
3 Day of Week:			
4 Day of Week:			
5 Day of Week:			
6 Day of Week:			
7 Day of Week:			
		Total:	
Math/ other notes		Patterns:	

Food Waste Audit Tracking Sheet

Week 2

Volume:		What Changes are you making:	
DAY	Type of food	# of FULL containers	Notes/ Reasons Why
8 Day of Week:			
9 Day of Week:			
10 Day of Week:			
11 Day of Week:			
12 Day of Week:			
13 Day of Week:			
14 Day of Week:			
		Total:	
Math/ other notes		Patterns:	