

Participant Name:

Recipe Name:

Clean Eating Checklist

How many points can you earn?

Check each box that applies to your recipe.

- | | |
|--|--|
| <input type="checkbox"/> 10 Ingredients or Less (5pts) | <input type="checkbox"/> Nuts and/or Seeds (5 pts) |
| <input type="checkbox"/> Fresh Ingredients (3 pts) | <input type="checkbox"/> Vegetables (2 pts) |
| <input type="checkbox"/> Raw or Uncooked (5 pts) | <input type="checkbox"/> Fruits (2 pts) |
| <input type="checkbox"/> Number of Food Groups _____
(2pts/group) | <input type="checkbox"/> Limit Cheese and Butter (2 pts) |
| <input type="checkbox"/> Whole Grains (3 pts) | <input type="checkbox"/> Avoid: Refined Sugars, Salt, and
Processed Meats (2 pts) |

Total Points _____



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