



Family: _____
Classroom(s): _____



Protein

Family Member	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total Servings
	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	
	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	
	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	
	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	P= P=	

P = Protein Serving (1 point per serving)

Please return this tracking slip to school on: _____

Parent Signature: _____