



THE HEIGHTS

COUNSELING AND WELLNESS

Daily Food and Mood Journal

Date: _____

Time of day	Place	Food/Bev.	How much	Mood before	Mood after

What's your mood? (i.e., exhausted, angry, sad, frustrated, stressed, depressed, overwhelmed, anxious, lonely, jealous, hopeful, content, happy, thrilled, etc.):

My day in review (i.e., times/situations/moods likely to cause cravings, types of food most likely to crave, etc.):