WORKSHEET

Tray Waste Data Entry Form

		Researcher Name			Location (School Name)			
Date: **Lunch period:**								
Wasted Food Item	**Measured Weight**	**Tray 1**	**Tray 2**	**Tray 3**	**Tray 4**	**Tray 5**	**Tray 6**	**Tray 7**

Notes: