

8th Grade NPA Final Project Answer Sheet

Name: _____

- I. Personal Information: (you do not have to provide this information but you should initial in the space that you went to the site and completed the information)

A. Body Fat: _____

B. BMI: _____

II. Quizzes

A. Dairy: _____

D. Proteins: _____

B. Fruit: _____

E. Vegetable Quiz: _____

C. Grains: _____

IV. Track Your Snack:

- B. SuperTracker's Food-A-Pedia

1. Search for your favorite snack using Food-A-Pedia and select the amount you typically eat.

a) _____

b) _____ food groups

c) _____

d) _____ total calories

e) _____ calories from saturated fat

f) _____ calories from added sugars

g) _____ mg

h) More often Less often The same Why?

i) _____

k) _____

2. Compare 1 cup of "Apple juice" and 1 cup of "Fruit drink".

a) _____

b) _____

c) _____

- 3.

a) _____

b) _____

c) _____

d) _____ total calories

e) _____ calories from saturated fat

f) _____ calories from added sugars

g) _____ mg

	<i>Food Choice 1</i>	<i>Food Choice 2</i>
Name of Snack		
Snack Portion Size (e.g., 1 cup)		
Number of Food Groups (Per Portion)		
Number of Calories (Per Portion)		
Amount of Saturated Fat (Per Portion)		
Amount of Added Sugars (Per Portion)		

Amount of Sodium (Per Portion)		
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4. _____

5. _____

V. What's Your Plan?

B. Instructions: Personalize a SuperTracker profile and review your personalized plan (My Plan).

1. _____ calories
2. I thought it would be... higher lower I got the calorie allowance I expected
3. _____
4. _____

Food in the Grains Group	Amount that Counts as 1 Ounce of Grains
1.	
2.	
3.	

5. Take a look at your daily food group targets.
 - a. _____ ounces
 - b. _____ cups
 - c. _____ cups
 - d. _____ cups
 - e. _____ ounces
 - f. Yes or No If you answered no, which food group(s) could you improve on?

6. _____

7. _____

8. _____

VI. Build Health Meal

B. Instructions: build a 1-day menu that meets your daily food group targets and stays within your daily calorie allowance

1. _____
2. _____ calories
3. How much of each food group does your menu include?
 - a) Grains _____ ounces
 - b) Vegetables _____ cups
 - c) Fruits _____ cups
 - d) Dairy _____ cups
 - e) Protein Foods _____ ounces
 - f) _____ grams
 - g) Yes _____ or No
 - h) _____ grams
4. Yes _____ or NO
5. _____ milligrams

- 6. Yes _____ or NO
- 7. It was easy It was difficult It was neither easy nor difficult
- 8. _____
- 9. Similarities _____
- Differences _____

VII. Get Active

B. Physical Activity Tracker

- 1. _____
- 2. at least _____ minutes
- 3. at least _____ days a week
- 4. at least _____ days a week
- 5. _____
- 6. _____
- 7. Yes or No
- 8. Yes, _____ or No
- 9. a. Muscle-strengthening: _____
- b. Bone-strengthening: _____
- 10. a. The weather is bad: _____
- b. I'm not athletic: _____
- c. I don't have access to gym equipment: _____
- 11. _____

VIII. Balance Your Calories

B. Instructions: Discuss each question with your group and fill in your answers together.

- 1. _____
- 2. Goes down Stays the same Goes up
- 3. Goes down Stays the same Goes up
- 4. Goes down Stays the same Goes up
- 5. _____
- 6. _____
- 7. _____
- 8. Walking for 10 minutes or Running for 10 minutes
 - a) _____