



QUESTIONS FOR WEIGHT CONTROL PROGRAM.

Please UNDERSTAND THAT IT IS NOT ABOUT FOOD!

- 1) What is your goal?
- 2) Why do you want to lose weight? Is it for yourself, family or peer pressure?
- 3) What are your beliefs about weight? i.e.: is it emotional? Lack of self-esteem, grief, family or peer pressure
- 4) What are your triggers?
- 5) What food(s) would you say is/are your kryptonite?
- 6) What is your current diet like?
- 7) How much water do you usually drink in a day _____ Pop _____ Alcohol _____ Caffeine _____
- 8) What type of an eater are you? (circle 1) 3 meals day only grazer snacker
- 9) What times of day do you usually eat?
- 10) What dieting protocols or programs have you tried?
- 11) What program/protocol did you have the most success with?
- 12) Do you have a support system at home or work?
- 13) Can you list 3 reasons you want to lose weight?
- 14) What fears do you have around losing weight?
- 15) Do you eat or snack as a reward? When you are bored, upset, angry or:
- 16) On a scale of 1 – 10 how motivated are you to succeed?