FCCLA@theTable Advanced Meal Planning Template  Student Name:			
		Date:	Planning Overview Meal Name:
	Type of Meal (circle one): Breakfast / Lunch / Dinner / Snack / Dessert		
•	Number of People Served:		
Step	o 1: Dietary Preferences and Restrictions		
	1.List the dietary needs/preferences of the people sharing the meal:     » Example: Vegetarian, gluten-free, low-sodium, nut-free, etc.		
Step	o 2: Nutritional Balance		
	Protein Source:		
	Vegetables / Side Dishes:		
•	Whole Grains / Carbohydrates:		
	Fats (if applicable):		
•	Dessert/Optional Items:		
Step	o 3: Cultural or Seasonal Influence		
•	Cultural Influence: Which cultural tradition or family recipe does this meal reflect?		
•	Seasonal Ingredients: Highlight any ingredients that are in season or locally sourced.		
Step	o 4: Budget Planning		
•	Protein Source: \$		
•	Vegetables / Side Dishes: \$		
•	Whole Grains / Carbohydrates: \$		
•	Fats (if applicable): \$		
•	Dessert/Optional Items: \$		
Step	5: Cooking Timeline		
	Preparation Time: minutes  Cooking Time: minutes		

## **Step 6: Presentation Plan**

• How will you present the meal? (e.g., plating style, table setting, etc.)