

Purely

Plant-Based

Support for a Whole New You

Workbook

Module One

Prepare Your Kitchen



Kitchen Check

Remove these items. Check each off as you complete your assessment of your supplies.

- Sugar and sugar substitutes
- Eggs
- Caffeine (Or limit coffee to 1-2 cups a day)
- Dairy
- Meat
- Processed Foods
- Soda
- Nicotine

Prepare Your Kitchen



Kitchen Check

Grocery Shopping

Add in these items to your kitchen. You can use this list to help you while grocery shopping. *Avoid foods that have pesticides or fertilizers.*

- Stevia
- Greens
- Fruits
- Water
- Lemon
- Legumes (Beans, Peas and Lentils)
- Nuts and seeds
- Herbal Teas

Why have you chosen a plant-based diet?



Understanding why you are wanting to make a change in your diet will help you to be successful with the process. Take a few moments to reflect and write down what has motivated you or the reasons behind the change to a plant based diet.

Goals



What have been some of your biggest frustrations surrounding food and your health?

Goals



What have you tried up to this point? Was anything successful? How did you feel afterwards?

Goals



What do you hope to accomplish by switching to a plant based diet?

Goals



Do you have a good support system in place as you transition to plant based?

Are there others in your home who will be making the change as well or will they eat a different diet?

Goals



Write down one big picture goal. (10-15 years in the future)

Thinking of your big picture goal, what is one goal that works towards that big picture goal in the next 2-3 years?

Thinking of your 2-3 year goal, what is one achievable goal that you could complete to move toward that goal in the next 2-3 months?
