

Dinner Planner

Chef: _____ Date: _____

Menu

Main Dish _____

Vegetable: _____

Starch: _____

Other (Dessert? Rolls?) _____

Beverage: _____

Recipes

For _____ Source _____

For _____ Source _____

For _____ Source _____

Time Plan

Shopping List

Student's Comments/Evaluation: _____
