	ΔT N	B TAB	TAR	TAR	TAR	
ï	i' 'Y		.,,,,,	175	יקר	

PERSONAL WEIGHT LOSS PROGRESS

For use of this form, see AR 600-9; the proponent agency is DCS, G-1.

MY GOAL WEIGHT	MY WEEKLY WEIGHT LOSS GOAL

Weigh yourself regularly (same time of day, preferably early morning with the same amount of clothing), and record your progess Weigh only one time per week. Do not expect to lose exactly the same amount of weight each week because the rate of weight loss fluctuates.

DATE	WEIGHT	PROGRESS	DATE	WEIGHT	PROGRESS