Prevalence of malnutrition is common among school children. There is clear evidence that ill health and malnutrition adversely affect education. Simple health and nutrition intervention delivered through education system can improve education outcomes. Studies have shown both macronutrient and micronutrients deficiency in school children in Kenya. There is very little information available about the nutrition status of pre-adolescents whose growth rates are rapid and nutrient demands are high in preparation for adolescent stage. To curb deficiencies, it is vital for frequent dietary and nutrition status of pupils to be determined. This leads to determination of pupils' dietary practices, nutrition status, and the relationship between dietary practices and nutrition status of preadolescent pupils. Nutrition status is an important marker of overall health and linear growth. Retardation has serious long-term physiological and economic consequences. It is therefore important that factors influencing pupils' nutrition status be established. A descriptive survey with cross sectional design study was carried out on a sample of 400 mixed primary school pupils aged 10-11 years in Thika District. Five schools were selected using simple random sampling method from public mixed day schools. In each school, eighty pupils aged 10-11 years were simple random sampled. Data was collected by structured questionnaire and observation. Pupils' social economic and demographic factors, anthropometrical measurement, observation list, 24-hour dietary recall, and food frequency were determined. The instruments were pre-tested. Demographic data collection was carried out. Quantitative data was analyzed by statistical package of social sciences (SPSS). Anthropometrical data was transformed to nutrition indices by use of EPI-INFO2000 computer software. Each pupil's Body Mass Index was determined too. The indices were compared to the National Center for health statistics (NCHS) reference norms. The 24-hour recall results were analyzed by Nutri-survey package. This was then compared to RDAs to establish if there was adequate consumption. Qualitative data was analyzed by, summarizing and categorizing into themes. Chi-square was used to determine association between categorical variables. Pearson product moment correlation coefficient(r) was used to show the relationship between non-categorical variables. Consumption of protein was 28.5% below the recommended daily allowance while for vitamin C was 84.8% below RDA. Consumption of iron was 64.9% below RDA while consumption of the micronutrients, vitamins B6 and calcium was 4% and 79.7% below RDA respectively. This was caused by less consumption of foods that are rich in micronutrients. Overall prevalence of stunting and thinness was 24.25% and 23.5%, respectively. The prevalence of stunting and thinness decreased with those parents that had well-paying jobs. The paired t-test compared the means of the daily intake of the nutrients by gender, which revealed that there was a significant difference (p-value<0.05) with males having a higher mean intake as compared to their female counterparts. From the study, it can be concluded that there was a significant difference between the nutrition status of pupils aged 10-11 years old and the dietary practices. Pupils that received better dietary practices were healthier than those that didn't. The dietary practices, income earning of parents, and education level affected the nutrition status of pupils. Malnutrition was prevalent in most schools. Findings suggest the need for frequent assessment of nutrition status of pupils and determination of causal factors of malnutrition in schools countrywide.