

Site Visit Form

Must be completed by the Sponsor within the first two weeks of operation for all new sites and sites with previous operational problems

Date of Site Visit:	Monitor's Arrival Time:	Departure Time:
Site Name:	Site Address:	

1. Are the following records maintained and available for review:

Yes	No	N/A		Yes	No	N/A	
			Permit to operate a food service (self-prep sites only)				Production records (self-prep sites only)
			HAACP records (school sponsors only)				Menu
			Delivery Receipts (vended sites only)				Daily meal counts
			Water samples (if not using public water)				Camp Permit (camps only)
			Eligibility documentation (closed enrolled and camp sites)				
			If 'no' to any of the above has the Sponsor agreed to maintain required documents on site?				

			2. Has all site staff attended SFSP training?
			3. Is the site notifying the Sponsor of meal time changes including field trips?
			4. Is the site staff counting meals as trained by the Sponsor? If 'No' # of disallowed meals
			5. Is the site adjusting the number of meals prepared/ordered to limit second meals/leftovers?
			6. Is the menu posted and served as planned?
			7. Do all meals meet meal pattern requirements? If 'No' # of disallowed meals
			8. Does the site meet all Department of Health regulations regarding sanitation and storage?
			9. Is the site staff following the adult meal policy as trained by the Sponsor?
			10. Are meals served at the approved meal service times?
			11. Are all meals served and consumed on site? If 'No' has the site been approved for FOC? If 'No', # of disallowed meals
			12. Open sites- is there adequate signage informing the public of free meals? If no, contact SED for a free banner.
			13. Is the And Justice for All Poster displayed in a prominent place?

Questions 14-16 applies only to sites that receive delivered meals

			14. Does the site staff know how to handle breakdowns in delivery?
			15. Are delivered meals being counted and signed for upon delivery?
			16. Are vended meals being served as a unit? # of disallowed meals

If 'No' to any of the above, explain any problems and the corrective action that will be implemented:

I CERTIFY that this site has been visited and has the capability and facilities for the meal service planned for the number of children anticipated to be served, and that the information on this form is true and correct; that the sponsor is aware that deliberate misrepresentation or withholding of information may result in prosecution under applicable State and federal criminal statutes; and that this program will be available to all children regardless of race, national origin, sex, age or disability.

Site supervisor's name _____

Monitor's name _____

Site supervisor's signature _____

Monitor's signature _____