



SUMMER FOOD SERVICE

Providing **free** meals to Arizona children.

First Week Site Visit Form

DATE OF SITE VISIT	MONITOR ARRIVAL TIME	DEPARTURE TIME
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SITE NAME

SITE ADDRESS

DISCUSSION WITH SITE STAFF (LIST NAMES)

Please make any Notes and Observations to the following questions

HAS THE SITE SUPERVISOR ATTENDED A TRAINING SESSION?

Yes No Comments:

ARE MEALS BEING COUNTED AND SIGNED FOR?

Yes No Comments:

ARE ALL REQUIRED RECORDS BEING COMPLETED?

Yes No Comments:

ARE MEALS SERVED AS SECOND MEALS EXCESSIVE?

Yes No Comments:

DO MEALS MEET MEAL PATTERN REQUIREMENTS?

Yes No Comments:

IS THERE PROPER SANITATION/STORAGE?

Yes No Comments:

IS THE SITE SUPERVISOR FOLLOWING PROCEDURES ESTABLISHED TO MAKE MEAL ORDER ADJUSTMENTS?

Yes No Comments:

ARE MEALS SERVED WITHIN APPROPRIATE TIME FRAMES?

Yes No Comments:

ARE ALL MEALS SERVED AND CONSUMED ON SITE?

Yes No Comments:

IS EACH MEAL SERVED AS A UNIT?

Yes No Comments:

ARE THERE ANY PROBLEMS WITH DELIVERY?

Yes No Comments:

IS THERE DOCUMENTATION OF CHILDREN'S INCOME ELIGIBILITY, IF APPLICABLE?

Yes No Comments:

IS THERE A NONDISCRIMINATION POSTER, PROVIDED BY THE SPONSOR, ON DISPLAY IN A PROMINENT PLACE?

Yes No Comments:

LIST ANY PROBLEMS THAT WERE NOTED DURING THE VISIT, AND ANY CORRECTIVE ACTIONS THAT WERE INITIATED TO ELIMINATE PROBLEMS:

Site Supervisor's Signature _____ Date _____

Monitor's Signature _____ Date _____