

**Grants Coordination and School
Support Summer Food Service Program**



Monitor Site Review Form

* Complete an original and one copy. The copy should be left with the site supervisor and the original retained at the sponsor's office.

General Information

Date of Review:	
Site Name:	Site Agreement #:
Site Supervisor' Name:	Site Phone #:
Approved Serving Time:	Approved Meal CAP:
Monitor Arrival Time:	Monitor Departure Time:
Name/Title of person contacted at the site:	
Number of children meeting the free meal family size and income eligibility standard: _____** Applicable only for camps/sites using free meal applications for eligibility.	

Meal Service

- Type of meal service observed (circle one): Breakfast Lunch Snack Supper
- Record the meal count for the day of review below.

Number of meals delivered/prepared:	
	+
Number of meals leftover from previous day:	
	=
A. Total Meals Available:	
<hr/>	
Number of first meals served to children:	
	+
Number of second meals served to children:	
	=
B. Total Potential Reimbursable Meals:	
<hr/>	
Number of meals served to Program Adults:	
	+
Number of meals served to Non-Program Adults:	
	+
Number of other non-reimbursable meals:	
	+
Number of unserved or excess meals:	
	=
C. Total Non-Reimbursable Meals:	
<hr/>	

**** Check that A = B + C**

Meal Service (cont.)

3. Record the number of disallowed meals in each category for the observed meal service on the day of review. Provide corrective action for each violation on page 3.

a. Served outside approved time	
b. Missing components	
c. Inadequate components	
d. Consumed offsite	

e. Over CAP	
f. Non-unitized	
g. Served to adults but included in count of reimbursable meals	
h. Other disallowed (specify)	

4. Record the number of first meals of the same meal type served on each of the 5 serving days prior to the day of review and calculate the average first meals served for the days recorded.

DATE						TOTAL	Total Meals Served	AVG. 1st Meals
# of First Meals	+	+	+	+	=		÷ # of days =	

5. a) Multiply the average first meals calculated in question #4 by 0.8.

b) Are first meals on the day of review equal to or greater than this figure?

YES	NO
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If NO, lower the meal order for this site beginning tomorrow.

NEW LOWER MEAL COUNT (starting tomorrow): meals

6. Menu observed on the day of review:

Meat/Meat Alternate: _____ Bread/Grain: _____

1st Fruit/Vegetable: _____ Milk: _____

2nd Fruit/Vegetable: _____

Personnel and Meal Service (Circle the answer)

Provide corrective action for any "NO" answers at the bottom of page 3.

- | | | | |
|--|--|-----|----|
| 1. Does the site have sufficient food service supervision? | <table border="1"><tr><td>YES</td><td>NO</td></tr></table> | YES | NO |
| YES | NO | | |
| 2. Has the site supervisor attended a training session? | <table border="1"><tr><td>YES</td><td>NO</td></tr></table> | YES | NO |
| YES | NO | | |
| 3. Are accurate counts being taken of meals served? | <table border="1"><tr><td>YES</td><td>NO</td></tr></table> | YES | NO |
| YES | NO | | |
| 4. Is the site supervisor following procedures established to adjust meal orders each day? | <table border="1"><tr><td>YES</td><td>NO</td></tr></table> | YES | NO |
| YES | NO | | |
| 5. Are meals being served during the approved meal times? | <table border="1"><tr><td>YES</td><td>NO</td></tr></table> | YES | NO |
| YES | NO | | |
| 6. Does site staff serve food at proper temperatures and in accordance with local health department standards? | <table border="1"><tr><td>YES</td><td>NO</td></tr></table> | YES | NO |
| YES | NO | | |

Records and Recordkeeping (Use YES, NO, or N/A When Not Applicable)

Provide corrective action for any "NO" answers at the bottom of this page.

1. If applicable, are meals counted before delivery receipt is signed? _____
2. Are invoices maintained for all food purchased and/or meals delivered? _____
3. Are meal production records kept for each day (self prep. site)? _____
4. Is an inventory record being kept for this site (self prep. site)? _____
5. Is a **daily** meal count of all meals (by type) served to children, program adults, and non-program adults maintained for this site ? _____
6. Is a **daily** count of second meals served maintained for this site? _____
7. If applicable, are records maintained of all time food service personnel spend on food service each day/month? _____
8. If applicable, is there documentation of children eligible for free meals? _____

Explain any "NO" answers below plus any additional comments:

Corrective Action Needed:

Corrective Action Taken:

Action needed by: _____

Action completed: _____

Corrective action discussed with:

Name and Title

I certify that the above information is correct.

Monitor's Signature & Date

Site Representative's Signature & Date