

## Food and Nutrition Service Seamless Summer Option Review Form

### Individual Site

SFA:	Date of Review:
School:	
Address:	
Name/Title of Person(s) Interviewed:	
Reviewer(s):	

1. Menu plan for this site:  NSMP/Assisted NSMP  Traditional  Enhanced  Other
2. Offer vs. Serve?  Yes  No If Yes, # items required: Breakfast \_\_\_\_\_ Lunch/Supper \_\_\_\_\_
3. A. Site Type:  Open  Restricted Open  \* Enrolled  Migrant  Camp  
 B.  Year Round School  Regular School Calendar

	Comments/Explanation										
4. Is the site operating in accordance with provisions of the approved application for: A. Site Type? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
B. Meals offered? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
C. Meal service time (observed meal)? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
5. If the site is an academic summer school, are provisions to open the site to the community adequate? <input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A											
6. A. For enrolled sites and camps: are the applications approved properly? <input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A B. For enrolled sites only: Is 50% or more of the enrollment free/reduced eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A											
7. Meal Observed	<table style="display: inline-table; border: none;"> <tr> <td style="border: none;">Brk</td> <td style="border: none;">AM Snk</td> <td style="border: none;">Lunch</td> <td style="border: none;">PM Snk</td> <td style="border: none;">Supper</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/></td> <td style="border: none;"><input type="checkbox"/></td> <td style="border: none;"><input type="checkbox"/></td> <td style="border: none;"><input type="checkbox"/></td> <td style="border: none;"><input type="checkbox"/></td> </tr> </table>	Brk	AM Snk	Lunch	PM Snk	Supper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brk	AM Snk	Lunch	PM Snk	Supper							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
8. A. Time of meal each service.											
B. Is the meal service time as stated on the application? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
9. Were all required food items/components available to all students participating in NSLP? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
10. Did all observed lunches claimed for reimbursement contain the required number of food items? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
11. Were all meals consumed on site? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
12. Do the portion sizes appear to meet the minimum meal pattern requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
13. Does a review of production records and procedures indicate that required amounts of food were available for service for each day of the review period and the day of the review? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
14. Does the site have an adequate system for documenting the number of meals served? <input type="checkbox"/> Yes <input type="checkbox"/> No*											
12. Any Food Safety/Sanitation Problems Noted? <input type="checkbox"/> Yes* <input type="checkbox"/> No											

13. Participation: As Estimated on application		
As Observed on day of visit		
14. If this is a Summer School Site: # of Summer School Students Served	Actual Count OR	Est. %
# of other children served	Actual Count OR	Est. %

**CIVIL RIGHTS**

<b>Answers marked with an asterisk (*) must be explained in General Comments</b>						<b>Yes</b>	<b>No</b>	<b>N/A</b>
CR 1. Is a USDA/FNS approved poster displayed in a prominent place and visible to recipients?						<input type="checkbox"/>	<input type="checkbox"/> *	
CR 2. Is access to the program at the site non-discriminatory with regard to age, sex, disability, race, color, or national origin?						<input type="checkbox"/>	<input type="checkbox"/> *	
CR 3. Is the correct non-discrimination statement included on appropriate program materials?						<input type="checkbox"/>	<input type="checkbox"/> *	<input type="checkbox"/>
CR 4. Are foreign language translations available when a significant number of persons speaking only a foreign language are in the population?						<input type="checkbox"/>	<input type="checkbox"/> *	<input type="checkbox"/>
CR 5. Are procedures established to receive complaints alleging discrimination?						<input type="checkbox"/>	<input type="checkbox"/> *	
CR 6. Have there been any written or verbal complaints alleging discrimination?						<input type="checkbox"/> *	<input type="checkbox"/>	
CR 7. (Enrolled sites and camps only) Are incorrectly denied free and reduced price applications disproportionately composed of minority applications?						<input type="checkbox"/> *	<input type="checkbox"/>	<input type="checkbox"/>
<b>CR 8. ACTUAL CURRENT ATTENDANCE BY RACIAL/ETHNIC GROUP</b>								
BLACK OR AFRICAN AMER	ASIAN	AMER INDIAN OR ALASKA NATIVE	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	WHITE	HISPANIC OR LATINO	TOTAL		
CR 9. <u>If all program participants at the site are of only one race/ethnic group, indicate the general racial composition of the site which the area serves</u>								

*Answers marked with an asterisk (\*) must be explained*

**ADDITIONAL/GENERAL COMMENTS:**

**PROBLEMS IDENTIFIED:**