



At-Risk Afterschool Meals Review Form for Snack

NOTE: This site review form is for school food authority (SFA) use ONLY. SFAs are required to conduct no less than two on-site snack meal service reviews of the At-Risk Afterschool Meals during the school year, one of which must be conducted within the first four weeks of operation.

School Food Authority Name: _____

Site Contact Name & Job Title: _____

Site Name & Address: _____

At-Risk Afterschool Program/Activity: _____

If Applicable License Expiration Date: _____ **License Capacity:** _____

Date of Review: _____ **Today's Attendance:** _____

Average Daily Snack Participation: _____

Total Number of Snacks Served on Review Day: _____

Yes | No | N/A

- | | |
|-------|---|
| _____ | 1. Is there a head count of children receiving snacks? |
| _____ | 2. Do the snacks meet meal pattern requirements? |
| _____ | 3. Are zero desserts offered per week? |
| _____ | 4. Are production records maintained? |
| _____ | 5. Do the portion sizes meet the meal pattern requirements? |
| _____ | 6. Are only snacks that contain the required number of components recorded for reimbursement? |
| _____ | 7. Is no more than one snack per child, per day counted and claimed? |
| _____ | 8. Are sanitary procedures used in handling food? |
| _____ | 9. Has training on proper food handling procedures been provided to staff? |

Explain all "No" answers.

Explain the corrective action plan for all "No" answers.

What date will corrective action be implemented by and who is responsible for the implementation?

Follow-up visits must be conducted within 45 days of the initial visit if corrective action was required. What were the observations after the corrective action was implemented?

School Representative & Title

Date

SFA Reviewer & Title

Date