First Week Visit Form

Date of site visit: _____ Monitor's arrival time: _____ Departure time: _____

Site name: _____ Site address: _____

Discussion with site staff (list names): _____

Areas of Discussion	Notes and Observations
Has the site supervisor attended training session?	
Are meals being counted and signed for?	
Are all required records being completed?	
Are meals served as second meals excessive?	
Do meals meet meal pattern requirements?	
Is there proper sanitation/storage?	
Is the site supervisor following procedures established to make meal order adjustments?	
Are meals served within appropriate time frames?	
Are all meals served and consumed onsite? (Note if State agency and sponsor allow fruits or vegetables to be taken off site).	
Is each meal served as a unit?	
Are there any problems with delivery?	
Is there documentation of children's income eligibility, if applicable?	
Is there a nondiscrimination poster, provided by the sponsor, on display in a prominent place?	

List any problems that were noted during the visit, and any corrective actions that were initiated to eliminate the problems:

_____

_____

_____

_____

_____

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_____ _____

Site Supervisor's Signature **Monitor's Signature**