**First Week Visit Form**

Date of site visit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Monitor’s arrival time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departure time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Site address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Discussion with site staff (list names): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **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 at the time approved by the State agency? |  |
| Are all meals served and consumed on-site?  (Note if State agency and sponsor allow fruits/vegetables/grains 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 an “And Justice for All” poster, provided by the sponsor, on display in a prominent place? |  |

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

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Date

Monitor’s signature