

**DELAWARE DEPARTMENT OF EDUCATION
SUMMER FOOD SERVICE PROGRAM
FIRST WEEK VISIT FORM**

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 on-site? (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?	

**DELAWARE DEPARTMENT OF EDUCATION
SUMMER FOOD SERVICE PROGRAM
FIRST WEEK VISIT FORM**

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

Site supervisor's signature

Monitor's signature