



SUMMER FOOD SERVICE PROGRAM Questionnaire for New Sponsors

Sponsor Name:

Year Round Service: Organizations must provide year round service to the community to participate on the SFSP. Residential summer camps do not have to meet this criteria and may indicate N/A.

1. Describe the year-round service the organization provides to the community:

Administrative Staff Training: Sponsors are required to train all administrative personnel, such as the monitor, claim preparer, and secretary.

1. Date(s) (or planned dates) of training:

2. Name of sponsor staff who will lead the training:

3. List topics to be covered in the training (or attach training outline):

Operational Staff Training: Sponsors are required to train all operational personnel such as cooks, site supervisors, kitchen helpers, drivers, and volunteers.

1. Date(s) (or planned dates) of training:

2. Name of sponsor staff who will lead the training:

3. List topics to be covered in the training (or attach training outline):

Preoperational Visit: Each site must have a preoperational visit prior to opening for meal service.

1. Date(s) of preoperational visit:

2. Name of sponsor staff who will conduct the preoperational visit(s):

Inclement weather: When a site is located outdoors (i.e. in a park), there must be a plan in place for inclement weather, even if it means closing the site temporarily.

1. Describe the arrangements you will make for feeding children in inclement weather (include how you will notify families of arrangements):

Monitoring: Each site must be monitored at least two times during operation: during the first week of operation and within the first four weeks of operation (known as the 4th week review.) All monitoring visits must be completed, regardless of the length of time a site is open.

1. List the name of all monitor(s):

2. List the date each site will receive the first week visit:

3. List the date each site will be reviewed within the first four weeks of operation:

4. Will you provide additional monitoring after the 4th week review has been completed?
 No Yes If yes, how often:

5. List the name of who will provide monitor oversight to ensure monitoring is completed and corrective action is assigned and followed-up appropriately:

Corrective Action: When problems are observed during a monitoring visit/review, the monitor must assign corrective action so that the site supervisor can correct the problem.

1. Describe the procedures that will be used to implement corrective action when necessary and how it will be monitored:

Meal Counts: Meals must be counted when a complete meal is served to a child.

1. If not using the meal count form provided by OSPI, what meal counting form will be used (provide form):

2. Who will be responsible for recording, maintaining, and consolidating the daily meal count forms:

3. Where will meal counts be taken?
 When child receives a complete reimbursable meal.
 When child enters the serving area. However, an adult will verify that the meal is a complete reimbursable meal by the following process:

4. If you have more than one site, how often will meal count forms be collected and by whom:
 Daily Weekly Monthly

Adjusting average daily participation (ADP): When site participation changes, sponsors must adjust the ADP on the Site Calendar in WINS.

1. Describe the system to be used to adjust the number of meals delivered/prepared when the average daily participation at the site changes (i.e.: how will the site inform the sponsor/kitchen/vendor of changes):

Holding temperatures:

1. Describe the procedures for proper holding of foods when delivered from a central kitchen to the site(s):

2. Describe the procedures to ensure meals are kept at the correct temperature prior to meal service:

3. Describe the procedures to handle leftover meals, including storage and refrigeration:

For Local Education Agencies ONLY

1. What meal planning system will be used:
 SFSP meal pattern
 NSLP/SBP meal patterns

I certify that the information contained on this application is true and correct to the best of my knowledge.

Signature of Sponsor Official

Title

Date