

**AFTER SCHOOL SNACK PROGRAM
SITE REVIEW FORM**

_____ First Review (within first 4 weeks of school year)

_____ Second Review

Name of School Building _____ What time school ends? _____

When are snacks served? _____

- 1) Are the snacks claimed only in approved after-school programs/initiatives? Yes _____ No _____
Specify the after school programs/initiatives _____
- 2) If site has less than 50% free/reduced price eligibles, does the after-school program have the appropriate applications and rosters on file so all snacks are correctly claimed categorically?
Yes _____ No _____
- 3) Is there an accurate point of service accountability for counting snacks when:
over 50% are free eligible? Yes _____ No _____
less than 50% are free eligible? Yes _____ No _____
- 4) What is the school's count of snacks on the day of visit? _____ What is the reviewer's count on the day of visit? _____ If there are significant differences in the counts, why is this occurring? _____
- 5) Does the site have an appropriate and accurate system to document daily attendance?
Yes _____ No _____
- 6) Does the snack menu meet the snack meal pattern requirements? Yes _____ No _____
- 7) Do all snacks claimed for reimbursement on the day of visit meet meal pattern requirements?
Yes _____ No _____
- 8) Is corrective action required? Yes _____ No _____

If yes, what must be changed? _____

When will it be corrected and by whom? _____

Name of Reviewer _____

Date of Review _____