

# Seamless Summer Option (SSO) of the National School Lunch Program (NSLP)

## SAMPLE SPONSOR MONITOR SITE REVIEW FORM

SSO sponsors must keep a record of on-site SSO monitoring on file for review purposes. *Each site must be visited at least once during operation.*

Sponsor: \_\_\_\_\_ Date of review: \_\_\_\_\_

Name of site: \_\_\_\_\_ Person conducting review: \_\_\_\_\_

Site supervisor: \_\_\_\_\_  Regular site  Camp site

Type of meal service reviewed: \_\_\_\_\_

Approved time of meal service: \_\_\_\_\_ Attendance on day of visit: \_\_\_\_\_

Number eligible for free or reduced-price meals (*camp only*): \_\_\_\_\_

Day of Visit	TYPE OF MEAL			
	Breakfast	Snack	Lunch	Supper
Number of meals prepared (single site – self prep):	_____	_____	_____	_____
Number of meals delivered (off-site prep):	_____	_____	_____	_____
Number of meals/milk from previous day:	_____	_____	_____	_____
Times meals delivered (off-site prep):	_____	_____	_____	_____
Times meals served:	_____	_____	_____	_____
Number of first meals served to children:	_____	_____	_____	_____
Number of meals leftover:	_____	_____	_____	_____

Menu Served: \_\_\_\_\_

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Describe how this site handled the serving of second meals:

*Note: Second meals **cannot** be claimed as reimbursable meals in the SSFP.*

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## SSO SPONSOR MONITOR SITE REVIEW FORM, continued

	YES	NO
Are meals served as a unit?	<input type="checkbox"/>	<input type="checkbox"/>
Did meal agree with menu planned?	<input type="checkbox"/>	<input type="checkbox"/>
Were all requirements met?	<input type="checkbox"/>	<input type="checkbox"/>
Are all children fed onsite?	<input type="checkbox"/>	<input type="checkbox"/>
Are meals planned and prepared with one meal per child in mind?	<input type="checkbox"/>	<input type="checkbox"/>
Are accurate counts taken of meals served?	<input type="checkbox"/>	<input type="checkbox"/>
Are meal production records kept?	<input type="checkbox"/>	<input type="checkbox"/>
Does site have sufficient food service supervision?	<input type="checkbox"/>	<input type="checkbox"/>
Is an inventory record being kept?	<input type="checkbox"/>	<input type="checkbox"/>
Is there proper sanitation and storage?	<input type="checkbox"/>	<input type="checkbox"/>
Are meals served within time frames specified on the site sheets?	<input type="checkbox"/>	<input type="checkbox"/>
Are records of adult meals kept?	<input type="checkbox"/>	<input type="checkbox"/>
Is there documentation of children eligible for free or reduced price meals <i>if applicable?</i>	<input type="checkbox"/>	<input type="checkbox"/>
Are meals counted before signing delivery receipt? (off-site prep)	<input type="checkbox"/>	<input type="checkbox"/>
Are meals checked for quality?	<input type="checkbox"/>	<input type="checkbox"/>
Are there provisions for storing or returning excess meals?	<input type="checkbox"/>	<input type="checkbox"/>
Is site supervisor following procedures established to make meal order adjustments?	<input type="checkbox"/>	<input type="checkbox"/>
Does site have a place to serve children's meals in case of inclement weather?	<input type="checkbox"/>	<input type="checkbox"/>
Is there a nondiscrimination poster provided by the sponsor, on display in a prominent place?	<input type="checkbox"/>	<input type="checkbox"/>

## SSO SPONSOR MONITOR SITE REVIEW FORM, continued

Major Violations	YES	NO
1. Adult meals included in count of meals served to children	<input type="checkbox"/>	<input type="checkbox"/>
2. Off-site consumption (children)	<input type="checkbox"/>	<input type="checkbox"/>
3. Meal pattern not met ( <i>Please specify</i> ): _____ _____	<input type="checkbox"/>	<input type="checkbox"/>
4. Meals not served as a unit	<input type="checkbox"/>	<input type="checkbox"/>

Check below if the following apply (*explain any checked items*).

- 5.  No Records \_\_\_\_\_
- 6.  Incomplete Records \_\_\_\_\_
- 7.  Poor Sanitation \_\_\_\_\_
- 8.  Other (*Please describe*): \_\_\_\_\_

Corrective action discussed with: *Name:* \_\_\_\_\_  
*Title:* \_\_\_\_\_

Corrective action taken:

Site supervisor's comments:

I certify that the above information is correct.

\_\_\_\_\_  
*Monitor's Signature*

\_\_\_\_\_  
*Site Supervisor's Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*