

PRE-OPERATIONAL VISIT WORKSHEET

Site name: _____ Site number: _____

Site address: _____

Site telephone number: _____

Person to contact for use of site: _____

Type of site (check appropriate type):

- | | |
|--|---|
| <input type="checkbox"/> Recreation center | <input type="checkbox"/> Park |
| <input type="checkbox"/> School | <input type="checkbox"/> Residential camp |
| <input type="checkbox"/> Church | <input type="checkbox"/> Play street |
| <input type="checkbox"/> Playground | <input type="checkbox"/> Other |
| <input type="checkbox"/> Settlement house | |

Estimated number of children the site could serve: _____

Estimated number of needy children in area: _____

Estimated number of personnel needed to adequately control the food service: _____

Is another site needed in this area? Yes No

Are the present facilities adequate for an organized meal service? Yes No

If answer is no, comments: _____

For the estimated number of children, does the site have: Yes No

- | | | |
|--|-------|-------|
| Shelter for inclement weather? | _____ | _____ |
| Adequate cooking facilities (if applicable)? | _____ | _____ |
| Adequate storage for prepared or delivered food? | _____ | _____ |
| Storage space for records at site? | _____ | _____ |
| Adequate refrigeration? | _____ | _____ |
| Access to a telephone? | _____ | _____ |

What type of organized activities are possible or planned at this site?

Improvements or corrective actions needed before site operates:

Monitor's Signature

Date

**SPONSOR/SITE AGREEMENT
FOR THE SUMMER FOOD SERVICE PROGRAM**

Name of site: _____

Address of site: _____

Site supervisor/State agency official: _____

Telephone: _____

The person named above agrees to:

1. Serve meals to all needy children 18 years of age and under (or persons 19 and over who are mentally or physically disabled and participating in a public or private nonprofit school program for the mentally or physically disabled).
2. Serve meals that meet the minimum meal pattern requirements.
3. Provide adequate supervision during the meal service.
4. Maintain and submit promptly such reports and records that the sponsor requires.
5. Report to the sponsor any changes in the number of meals required as attendance fluctuates.
6. Report any other problems regarding the meal services.
7. Comply with civil rights laws and regulations.
8. Attend sponsor training sessions.

Site Supervisor/State Agency Official

Date

Sponsor

Date