

Afterschool Snack Program Review Form

School Food Authorities must review each Afterschool Snack Program (ASP) two times per school year per 7 <u>CFR 210.9 (c) (7)</u>. The first review must be conducted during the first four weeks of program operation. The ASP review assesses each program's compliance with counting and claiming procedures and the snack meal pattern. This form can be used in completing these reviews. Documentation of the completed reviews must be kept on file for three years plus the current school year. If any items are marked "no," a Corrective Action (CA) box should be marked, and subsequent information should be provided, explaining corrective actions. All necessary actions should be taken immediately and should allow for all questions to have a "yes" marked after the corrective actions have been taken.

School District:	School Program:
Program Monitor or Administrator:	

Is there a charge for snacks? Yes / No	
• If yes, list prices:	
(First Review) Reduced Price:	Paid Price:
(Second Review) Reduced Price:	Paid Price:

1 st Review (within first four weeks of operation)	YES	NO	CA
 (50% and over Free & Reduced) 1. Are snack counts recorded at the time they are served? Describe the system: 			
 (Under 50% Free and Reduced) 1. Are current free and reduced applications on file? 2. Are snacks claimed based on individual student eligibility? 3. Are students claimed in the correct eligibility category? 4. Does the system prevent overt identification of students' 			
eligibility status?			
All Programs			
 Are daily attendance rosters maintained? Are only snacks that contain the required number of components recorded for reimbursement? 			
3. Are meal count records maintained to identify creditable snacks served?			
4. Are consolidated claim records completed and maintained by the SFA?			
 5. Are menu and production records completed daily? 6. Is only one snack per child per day claimed? 			



7. Have any changes to the ASP been reported to the Colorado Department of Education School Nutrition Unit?				
Number of Snacks Served:		Snack Men	u:	
Reviewer's Signature & Title:				
Date Reviewed:				
Corrective Action Plan (if any answers are NO):				
Date corrective actions will be implemented and by whom:				
Signature:	_ Date:			
Comments or Commendations:				



2 nd Review (anytime during the program s operation and before the end of the school year)	YES	NO	CA
 (50% and over Free & Reduced) 2. Are snack counts recorded at the time they are served? Describe the system: 			
 (Under 50% Free and Reduced) 5. Are current free and reduced applications on file? 6. Are snacks claimed based on individual student eligibility? 7. Are students claimed in the correct eligibility category? 			
8. Does the system prevent overt identification of students' eligibility status?			
 All Programs 8. Are daily attendance rosters maintained? 9. Are only snacks that contain the required number of components recorded for reimbursement? 10. Are meal count records maintained to identify creditable snacks served? 			
11. Are consolidated claim records completed and maintained by the SFA?12. Are menu and production records completed daily?			
 13. Is only one snack per child per day claimed? 14. Have any changes to the ASP been reported to the Colorado Department of Education School Nutrition Unit? 			
Number of Snacks Served:	Snack Men	u:	
Reviewer's Signature & Title:			
Date Reviewed:			
Corrective Action Plan (if any answers are NO):			



Date corrective actions will b	e implemented and by whom:
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Signature:_____ Date: _____

Comments or Commendations: