

**Summer Food Service Program
Pre-Operational Site Visit**

Instructions: Sponsors are required to complete this form for each *new site or sites that had operational problems the previous year*. New sites are defined as ones that did not operate in the previous year or operated a different service model in the previous year (i.e. operated congregate meal service the previous year and now are operating non-congregate).

1. Site Name (as it appears on the application):

2. Site Number:

3. Site Address:

4. Site Supervisor Name (this must be different from site monitor):

5. Type of Site (check appropriate type):

___ Recreation center

___ Park

___ School

___ Residential Camp

___ Church

___ Play street

___ Playground

___ Board of Education

___ Settlement house

___ Other: _____

6. Estimated number of children the site could serve: _____

7. Estimated number of needy children in area: _____

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

9. Is another site needed in the area? ___Yes ___No

10. Are the present facilities adequate for an organized meal service? ___Yes ___No
If NO, comments:

11. Check **YES** or **NO** for each of the following:

YES	NO	For the estimated number of children, does the site have:
		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?

12. What types of organized activities are possible or planned at this site?

13. Improvements or corrective actions needed before site operates:

14. Date of the last site's **health inspection**: ____/____/____

15. Expiration date for the site's **health permit** (permit is *required* for all prep sites):

____/____/____

Monitor's Signature:	Date:
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