Indiana Department of Education
SUPPORTING STUDENT SUCCESS

School & Community Nutrition Programs

Checklist of Materials for Food-Based SMI Nutrient Analysis

IMPORTANT: Please make copies of all materials as they may not be returned to you
Call your Field Consultant regarding any questions
Include this checklist with your SMI materials

School/Corporation Name:_____ **Agreement #:**_____
Contact Person:_____**Date of Visit:**_____
Address:_____**Phone:**_____

✓ **Meal Pattern: check Traditional or Enhanced and corresponding grade group(s) used for menu planning**

❑ Traditional Grade Group:	❑ Enhanced Grade Group:
❑ K-3	❑ K-6
❑ 4-12	❑ 7-12
❑ 7-12 optional	❑ K-3 optional

✓ **Menus (Include a copy of your menu with the SMI materials for the Field Consultant)**

- ❑ Select a 5-day week of lunch menus (previously served) for analysis
- ❑ Include <u>all</u> choices on the menu and any changes or substitutions made

✓ **Daily Production Records (Use production record provided by your Field Consultant)**

Please include the following information on each production record:

- ❑ Site name and meal date
- ❑ Indicate whether Offer vs. Serve
- ❑ All planned menu items, including milk, desserts, and condiments
- ❑ Form (i.e., canned, frozen, raw, cooked, etc.), pack size (size of can, amount used, etc.), and pack medium (light syrup, heavy syrup, own juices, etc.)
- ❑ Total number of servings prepared
- ❑ Total number of servings leftover
- ❑ Total number of servings taken/SERVED
- ❑ Number of student reimbursable meals and adult meals served
- ❑ Serving size of each menu item, including condiments
- ❑ Note if a recipe was used

❑ Projected amount and types of milk taken (please indicate below)

Skim White _____%	1% Chocolate _____%	Other (please specify)
Skim Chocolate _____%	2% White _____%	_____%
1% White _____%	2% Chocolate _____%	_____%

✓ **Recipes (Recipes should be included for any menu item that contains <u>more than one ingredient</u>)**

- ❑ All ingredients
- ❑ Weight and/or volume of each ingredient
- ❑ Serving size
- ❑ Number of servings made by recipe
- ❑ If using a USDA recipe, include recipe name, number, and use of alternate or optional ingredients

✓ **Nutrition Facts Labels/Nutrition Fact Sheets and Child Nutrition (CN) Labels for processed food items**

- ❑ Include a Nutrition Facts Label (from product packaging) or Nutrition Fact Sheet (from manufacturer)
- ❑ Include copies of CN Labels or the CN crediting information listed on the Nutrition Fact Sheet from the manufacturer

✓ **Other Documents for Field Consultant Review**

- ❑ Wellness Policy (copy for field consultant)
- ❑ HACCP Plan (Food Safety)
- ❑ Civil Rights Training Documentation (printed copy of quiz score and staff training attendance)

_____ _____
SNP Specialist **Date** **School Official** **Date**

151 West Ohio Street, Indianapolis, IN 46204-2798