

**IDOE Checklist of Materials for Food-Based SMI Nutrient Analysis**  
**IMPORTANT: Please make copies of all materials as they may not be returned to you**  
**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

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Traditional Grade Group:</b> | <input type="checkbox"/> <b>Enhanced Grade Group:</b> |
| <input type="checkbox"/> K-3                             | <input type="checkbox"/> K-6                          |
| <input type="checkbox"/> 4-12                            | <input type="checkbox"/> 7-12                         |
| <input type="checkbox"/> 7-12 optional                   | <input type="checkbox"/> K-3 optional                 |

√ **Menus** (Include a copy of your menu with the SMI materials.)

- Select and include a 5-day week of lunch menus (previously served) for analysis (7-day week for a RCCI)
- Include all choices on the menus and any changes or substitutions made

√ **Daily Production Records** (Use and include production records provided by the Indiana Department of Education for each day selected to be analyzed.)

**Please include the following information on each production record:**

- |   |  |
|---|--|
| <input type="checkbox"/> Site name and meal date  | <input type="checkbox"/> Total number of servings prepared                           |
| <input type="checkbox"/> Indicate whether Offer vs. Serve is implemented  | <input type="checkbox"/> Total number of servings leftover                           |
| <input type="checkbox"/> All planned menu items, including milk, desserts, and condiments   | <input type="checkbox"/> Total number of servings taken/SERVED                       |
| <input type="checkbox"/> Form (i.e., canned, frozen, raw, cooked, etc.), pack size (size of can, amount used, etc.), and pack medium (canned in light syrup or juice, etc.) | <input type="checkbox"/> Number of student reimbursable meals and adult meals served |
|   | <input type="checkbox"/> Serving size of each menu item, including condiments        |
|   | <input type="checkbox"/> Note if a recipe was used                                   |

**Estimate amount and types of milk taken (Please indicate below, and percentages should add up to 100%.)**

Fat-free White _____ %	Fat-free Chocolate _____ %	Fat-free Strawberry _____ %	Other (please specify) _____ %
1% White _____ %	1% Chocolate _____ %	1% Strawberry _____ %	_____ %

√ **Standardized Recipes** (Recipes should be included for any menu item that contains more than one ingredient, i.e., peanut butter sandwich, chicken and noodles, turkey wrap, corn with butter and salt, broccoli with cheese, etc.)

- |  |  |
|--|--|
| <input type="checkbox"/> All ingredients   | <input type="checkbox"/> Serving size                      |
| <input type="checkbox"/> Weight and/or volume of each ingredient   | <input type="checkbox"/> Number of servings made by recipe |
| <input type="checkbox"/> If using a USDA recipe, include recipe name, number, and use of alternate or optional ingredients |  |

√ **Nutrition Fact 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) (i.e., chicken nuggets, bread, hot dogs, canned fruit, chips, sliced/shredded cheese, canned vegetables, taco meat, pizza, etc.)  
Examples of fact labels we would not need: USDA Foods, flour, salt, spices, milk, sugar, fresh fruits and vegetables
- Include copies of CN labels or the CN crediting information listed on the Nutrition Fact Sheet from the manufacturer

√ **Documents to have for IDOE Field Consultant at the time of the SMI Site Review**

- |   |  |
|---|--|
| <input type="checkbox"/> Wellness Policy (provide a copy to the field consultant during site visit)   | <input type="checkbox"/> Health Inspection Reports (have available)    |
| <input type="checkbox"/> Civil Rights Training Documentation (provide a printed copy of the quiz score & staff training attendance to field consultant during site visit) (Civil Rights Training is to be conducted annually) | <input type="checkbox"/> HACCP Plan (Food Safety) (have available)     |
|   | <input type="checkbox"/> Free and Reduced Application (have available) |

\_\_\_\_\_  
SNP Consultant

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Official

\_\_\_\_\_  
Date

Indiana Department of Education  
 Division of School and Community Nutrition  
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 Indianapolis, IN 46204-2798