Afterschool Snack Program (ASP) On-site Monitoring Form

conducted within the first review must be conducted	wed twice per year. The first of t four weeks of the ASP open d sometime during the remain form must be kept on file for	ration. The seconder of the AS	Р	First review: Second review: Follow-up review:			
School food authority:			ASP site:				
Reviewer name:			Date of review:				
Person interviewed:							
	Name			Title			
Days of operation:	onday Tuesday We	ednesday [] T	Γhursda	y 🔲 Friday			
Is the site area eligible?	Yes No						
Does the district participate	in Healthy Food Certification (I	HFC)? Yes	☐ No				
Snack menu observed (in	clude components and serving size):						
	Serving time:						
	Number of students in attendance:						
			Numbe				
		stude	ents serv	ved:			
	All Sites (Area Eligible a	and Non-Area	Eligib	le)			
Answer each question be (area eligible and non-are		Yes	No*	Comments			
Does the afterschool carenichment activities?	re program offer educational or						
2. Are the menus shared w	rith appropriate staff?						
3. Were all meal componer	nts available to all students?						
4. Did all students take bo	th components of the snack?						
5. Does the observed snac point of service?	k line provide an accurate count a	at the					
	edure comply with the collection the Connecticut State Departmen	nt of					
7. Is only one snack per ch	ildren per day claimed?						
8. Are production records completed for each day?							
Do production records and serving size requires	document that menus meet comp ments?	oonent					
	s in HFC, do all snacks comply w tandards? <i>Enter</i> "NA" if not HFC						
*A "No" answer requires	corrective action. A follow-up	review must tak	e place	within 30 days due to			

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Non-area Eligible Sites Only								
Answer the questions below ONLY for non-area eligible sites.	Yes	No*	Comments					
Does the meal count system prevent overt identification of student eligibility status?								
2. Are students claimed in the correct eligibility category?								
3. How does the counter/cashier receive the names of free and reduced-eligible students?								
* A "No" answer requires corrective action. A follow-up review must take place within 30 days due to noncompliance.								
Corrective action required (Describe below): Date correction			n due:					
Signature of reviewer:		Da	nte:					
Signature of person interviewed:		Da	nte:					

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For more information, refer to the Connecticut State Department of Education's (CSDE) *Afterschool Snack Program Handbook* and visit the CSDE's Afterschool Snack Program webpage, or contact the school nutrition programs staff at the Connecticut State Department of Education, Bureau of Child Nutrition Programs, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841.

This form is available at https://portal.ct.gov/-/media/SDE/Nutrition/ASP/Forms/Monitoring_Form_ASP.pdf.

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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/ad-3027.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

- mail: U.S. Department of Agriculture
 Office of the Assistant Secretary for Civil Rights
 1400 Independence Avenue, SW
 Washington, D.C. 20250-9410; or
- 2. fax: (833) 256-1665 or (202) 690-7442; or
- 3. email: program.intake@usda.gov

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