

Afterschool Snack Program (ASP) Daily Snack Count and Production Record for Preschoolers in Site/Area Eligible Schools

Complete this form daily and return to the school food service department.

School/site: _____ Date: _____

Daily Snack Production Record

| Meal component <i>Choose two of five *</i> | Food item used | Food unit | Number of units used |
|---|----------------|-----------|----------------------|
| Milk, ½ cup | | | |
| Vegetables, ½ cup | | | |
| Fruits, ½ cup | | | |
| Grains, ½ ounce equivalent | | | |
| Meats/meat alternates, ½ ounce equivalent | | | |

* Snack menus must comply with the [ASP Meal Pattern for Preschoolers](#) and include two of the five components: 1) milk (whole unflavored milk for age 1 and unflavored low-fat or fat-free milk for ages 2-5); 2) vegetables; 3) fruits; 4) grains (whole grain-rich or enriched); and 5) meats/meat alternates. Juice cannot be served when milk is the only other component. ASP snacks in [Healthy Food Certification \(HFC\)](#) schools must also comply with the [Connecticut Nutrition Standards](#). For more information, refer to the Connecticut State Department of Education's (CSDE) [Crediting Summary Charts for the Preschool Meal Patterns of the School Nutrition Programs](#), [Menu Planning Guide for the Preschool Meal Patterns of the School Nutrition Programs](#), and [Afterschool Snack Program Handbook](#), and visit the CSDE's [Afterschool Snack Program](#) webpage.

Total snacks prepared: _____ Total snacks received by site: _____
(Count prior to snack service to confirm number sent)

Daily Student Snack Count

Cross off each number in order as each student receives a complete snack. Students must receive **both meal components** before a reimbursable snack can be counted.

- | | | | | | | | | | | | | | | |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 |
| 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 |
| 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 |
| 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 |
| 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | 101 | 102 | 103 | 104 | 105 |
| 106 | 107 | 108 | 109 | 110 | 111 | 112 | 113 | 114 | 115 | 116 | 117 | 118 | 119 | 120 |
| 121 | 122 | 123 | 124 | 125 | 126 | 127 | 128 | 129 | 130 | 131 | 132 | 133 | 134 | 135 |
| 136 | 137 | 138 | 139 | 140 | 141 | 142 | 143 | 144 | 145 | 146 | 147 | 148 | 149 | 150 |

Today's attendance: _____ Total snacks served (students only): _____

Daily Adult Snack Count

Snacks served to adults must be paid for by the adult or the school/organization responsible for the programming.

- | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|

Total snacks served (adults only): _____

Person completing form: _____

Print name

Signature

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For more information, refer to the CSDE's [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/daily_count_production_record_asp_preschool_site_area_eligible.pdf

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1. mail: U.S. Department of Agriculture
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Washington, D.C. 20250-9410; or
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