

**EXAMPLE**  
**CHILD AND ADULT CARE FOOD PROGRAM (CACFP)**  
**FAMILY-SIZE AND INCOME APPLICATION (FSIA)**

<b>PART 1. ALL HOUSEHOLD MEMBERS</b>		
a. Name(s) of Adult Participant(s) <i>FLORENCE SCOTT</i>		
b. Names of All Household Members (First, Middle Initial, Last)	Age of Adult Participant(s)	Check If <b>NO</b> Income
<i>FLORENCE SCOTT</i>	94	<input checked="" type="checkbox"/>
<i>FRANK SCOTT</i>		<input checked="" type="checkbox"/>
<i>FELECIA SCOTT</i>		<input type="checkbox"/>

<b>PART 2. BENEFITS</b>	
If any member of your household receives <b>SNAP, FDPIR, SSI, or Medicaid</b> benefits, provide the name and case number for the <b>ONE</b> person who receives benefits. <b>If no one receives these benefits, skip to PART 3.</b>	
NAME: _____	CASE NUMBER: _____

<b>PART 3. TOTAL HOUSEHOLD GROSS INCOME. You must tell us how much and how often.</b>				
<b>A. NAME</b> (List only household members with income)	<b>B. GROSS INCOME AND HOW OFTEN IT WAS RECEIVED</b>			
	<b>Earnings From Work Before Deductions</b>	<b>Welfare, Child Support, Alimony</b>	<b>Pensions, Retirement, Social Security, SSI, VA Benefits</b>	<b>All Other Income</b>
<i>Example: Jane Smith</i>	\$ 200 /weekly	\$ 150 /twice a month	\$ 100 /monthly	\$ _____ / _____
<i>FELECIA SCOTT</i>	\$ 2200 / monthly	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____

<b>PART 4. SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (ADULT MUST SIGN).</b>	
An adult household member must sign this form. <b>If Part 3 is completed, the adult signing the form also must list the last four digits of his or her social security number or mark the I do not have a social security number box.</b>	
<i>I certify (promise) that all information on this form is true and that all income is reported. I understand that the center or day care home will get federal funds based on the information that I give. I understand that CACFP officials may verify (check) the information. I understand that if I purposely give false information, the participant receiving meals may lose the meal benefits and I may be prosecuted.</i>	
Sign Here: <i>Felecia Scott</i>	Print Name: <i>Felecia Scott</i>
Date: <i>10/4/YYYY</i>	
Address: _____	Phone Number: <i>555-6666</i>
City: _____ State: _____	Zip Code: _____
Last four digits of social security number: *** - ** - <u>5</u> <u>5</u> <u>5</u> <u>5</u>	<input type="checkbox"/> I do not have a social security number

<b>PART 5. PARTICIPANT'S ETHNIC AND RACIAL IDENTITIES (Optional)</b>			
Choose one ethnicity:		Choose one or more (regardless of ethnicity):	
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Asian	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Black or African American
<input checked="" type="checkbox"/> Not Hispanic or Latino	<input checked="" type="checkbox"/> White	<input checked="" type="checkbox"/> Native Hawaiian or Other Pacific Islander	

DO NOT FILL OUT THIS PART. THIS IS FOR OFFICIAL USE ONLY.					
Annual Income Conversion:		Weekly x 52	Every 2 Weeks x 26	Twice a Month x 24	Monthly x 12
Total Income: <b>2200.00</b>	Per Week:	Every 2 Weeks:	Twice a Month:	Month: <b>X</b>	Year:
Household Size: <b>3</b>					
Categorical Eligibility:		Date Withdrawn:	Eligibility: Free <b>X</b>	Eligibility: Reduced	Eligibility: Denied
Reason:					
Determining Official's Signature: <i>Ima Fishul</i>				Date: <i>10/4/YYYY</i>	

The participant in the day care facility may qualify for free or reduced-price meals if your household income falls within the limits of this chart.

185 % of Poverty Level	
Household Size	Yearly
1	26,973
2	36,482
3	45,991
4	55,500
5	65,009
6	74,518
7	84,027
8	93,536
Each Additional Person:	9,509

“The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve the participant for free or reduced-price meals. You must include the last four digits of the Social Security Number of the adult household member who signs the application. The last four digits of the Social Security Number are not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number for the participant or other (FDPIR) identifier or when you indicate that the adult household member signing the application does not have a Social Security Number. We will use your information to determine if the participant is eligible for free or reduced-price meals, and for administration and enforcement of the Program.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity. Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. 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/USDA-OAS-CR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.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

1. Mail: U. S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410
2. Fax: 202-690-7442 or (202) 690-7442; or
3. E-Mail: [program.intake@usda.gov](mailto:program.intake@usda.gov)

This institution is an equal opportunity provider



## **CHILD AND ADULT CARE FOOD PROGRAM (CACFP) FY 2024 NOTIFICATION OF ADMINISTRATIVE REVIEW (AR)**

**MEMO TO \_\_\_\_\_ AGREEMENT # \_\_\_\_\_ DATE \_\_\_\_\_**

An Unannounced Administrative Review will be conducted at your institution between October 1, 2023, and September 30, 2024. Records are to be maintained on-site at all times for review purposes. If records are not immediately available, you will be given 1 hour to produce them. Per state auditor requirements, a copy of all documentation must be provided at the time of the review for the program specialist to retain and submit to the State Agency.. Records to be reviewed from October 1, 2023, to the last claim submitted include, but are not limited to:

1. Fiscal year 2024 application and agreement
2. Approved Family-Size and Income Applications (FSIAs) for the current year
3. CACFP participation data/CACFP Roster
4. Attendance records/arrival and departure times
5. Title XIX Documentation (Title XIX centers only)
6. Meal count worksheet/ Daily Record of Meals Served (DROMS)
7. Itemized receipts/Food Purchasing Form
8. Documentation of total revenues/income received by the institution/center. This includes bank and/or credit card statements of accounts where CACFP funds are deposited or are transferred to
9. Documentation of total expenditures of the institution/center. This should include bank and/or credit cards statements of accounts used to make any purchases of CACFP related expenses or used to pay for any other allowable CACFP expense
10. Documentation to verify that the institution is both financially viable and operating a nonprofit food program service such as Profit/Loss Statement, End-of-the-Year Report, Expenditure/Revenue report, etc.
11. End of the Month Inventory for food and milk
12. Monthly reimbursement claims
13. Menus as Served or Contract Meal Services Delivery Receipt
14. Group Plan
15. Individual Plan of Care
16. Child Nutrition (CN) labels/Product Formulation Statements (when applicable)
17. Labels for Cereal, Yogurt, and whole grain items served.
18. Procurement Documentation including Procurement Plan, Chart of Procedures, & Protest Procedures
19. Proof of CACFP record retention for three years
20. Documentation of CACFP key staff training
21. License or permit to operate a day care facility
22. Civil Rights Complaint-Filing form
23. And Justice for All poster displayed
24. Board Minutes for Nonprofit institutions
25. Institution's Organizational Chart
26. If multisited (in addition to the above items):
  - a. Preapproval visits for new centers
  - b. On-site monitor reviews
  - c. Policies & Procedures
  - d. Household contact documentation, if applicable
  - e. Proof of edit checks
26. Copy of the State Agency-approved contract if institution is under contract with an outside source.
27. Other \_\_\_\_\_

## Required Application Approval Trainings Checklist for Adult Day

Name of Trainings	Training Hours	How it is Offered
Adult Daycare Training Manual Workshop FY2024	3	Zoom
Sponsor Training <i>(only required if multisited)</i>	2	Zoom
Civil Rights for CACFP, FDCH, and SFSP	1	OSDE Connect

*\*OSDE Connect will be available in August*

Civil Rights Training for CACFP, FDCH, and SFSP			
Date	Trainer(s)		Capacity
OSDE Connect	Sherry		

SPONSOR TRAINING			
Date	Trainer(s)		Capacity
Thursday, August 24, 2023	Kassi	Zoom	100
Tuesday, August 29, 2023	Kassi	Zoom	100
Wednesday, September 6, 2023	Kassi	Zoom	100
Tuesday, September 19, 2023	Kassi	Zoom	100

### Adult Day Care Centers

**Date: August 23, 2023 at 9:00 am**

- Adult Daycare Training Manual Workshop FY2024 **and**
- Civil Rights for CACFP, FDCH, and SFSP **and**
- Sponsor Training *(only required if you have multiple centers under one agreement number)*
- Training Manual Workshop for FY2024 *(Only required if your organization also claims meals in CACFP for children)*

### Step-by-step Instructions to Register in the Training Calendar:

1. Go to the CACFP Online Application System:  
<https://cnp.sde.ok.gov/CACFP/SNPWelcomeM.aspx>
2. Log into the system using your assigned username & log-in
3. Go to the mustard yellow column on the left-hand side
4. Click on Training Calendar
5. Look at all the Titles and Dates of the Trainings available
6. Select **Details** for the Training you would like to attend.
7. Scroll to the bottom of the details section and Fill out the information – Name, Title, and Institution you are under.

## ADULT MEAL PATTERN

<b>Breakfast</b>	
<b>Food Components and Food Items<sup>1</sup></b>	<b>Minimum Quantities</b>
<b>Fluid Milk<sup>2</sup></b>	8 fluid ounces
<b>Vegetables, fruits, or portions of both<sup>3</sup></b>	1/2 cup
<b>Grains (oz eq)<sup>4,5,6</sup></b>	
Whole grain-rich or enriched bread	2 oz eq
Whole grain-rich or enriched bread product such as biscuit, roll, or muffin	2 oz eq
Whole grain-rich, enriched, or fortified cooked breakfast cereal <sup>6</sup> , cereal grain, and/or pasta	1 cup cooked
Whole grain-rich, enriched, or fortified ready-to-eat breakfast cereal (dry, cold) <sup>5,6</sup>	
Flakes or rounds	2 cups
Puffed cereal	2 1/2 cups
Granola	1/2 cup

<sup>1</sup> Must serve three components for a reimbursable meal. Offer versus Serve (OvS) is an option for adult participants.

<sup>2</sup> Must be unflavored lowfat (1 percent), unflavored fat-free (skim), flavored lowfat (1 percent), or flavored fat-free (skim). Six ounces (weight) or 3/4 cup (volume) of yogurt may be used to meet the equivalent of 8 ounces of fluid milk once per day when yogurt is not served as a meat alternate in the same meal.

<sup>3</sup> Pasteurized full-strength juice may only be used to meet the vegetable or fruit requirement at one meal, including snack, per day.

<sup>4</sup> At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count toward meeting the grains requirement.

<sup>5</sup> Meat and meat requirements may be used to meet the entire grains requirement a maximum of three times a week. One ounce of meat and meat alternates is equal to one ounce equivalent of grains.

<sup>6</sup> Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams of sucrose and other sugars per 100 grams of dry cereal).

# ADULT MEAL PATTERN

<b>Lunch/Supper</b>	
<b>Food Components and Food Items<sup>1</sup></b>	<b>Minimum Quantities</b>
<b>Fluid Milk<sup>2,3</sup></b>	8 fluid ounces
<b>Meat/Meat Alternates</b>	
Lean meat, poultry, or fish	2 ounces
Tofu, soy product, or alternate protein product <sup>4</sup>	2 ounces
Cheese	2 ounces
Large egg	1
Cooked dry beans or peas	1/2 cup
Peanut butter or soy nut butter or another nut or seed butter	4 Tbsp
Yogurt, plain or flavored, sweetened or unsweetened <sup>5</sup>	8 ounces or 1 cup
The following may be used to meet no more than 50 percent of the requirement: Peanuts, soy nuts, tree nuts, or seeds as listed in Program guidance, or an equivalent quantity of any combination of the above meat/meat alternates (1 ounce of nuts/seeds = 1 ounce of cooked lean meat, poultry, or fish)	1 ounce = 50 percent
<b>Vegetables<sup>6</sup></b>	1/2 cup
<b>Fruits<sup>6,7</sup></b>	1/2 cup
<b>Grains (oz eq)<sup>8,9</sup></b>	
Whole grain-rich or enriched bread	2 oz eq
Whole grain-rich or enriched bread product such as biscuit, roll, or muffin	2 oz eq
Whole grain-rich, enriched, or fortified cooked breakfast cereal <sup>9</sup> , cereal grain, and/or pasta	1 cup cooked

<sup>1</sup> Must serve all five components for a reimbursable meal if not doing Offer versus Serve (OvS) .

<sup>2</sup> Must be unflavored lowfat (1 percent), unflavored fat-free (skim), flavored lowfat (1 percent), or flavored fat-free (skim). Six ounces (weight) or 3/4 cup (volume) of yogurt may be used to meet the equivalent of 8 ounces of fluid milk once per day when yogurt is not served as a meat alternate in the same meal.

<sup>3</sup> A serving of fluid milk is optional for suppers served to adult participants.

<sup>4</sup> Alternate protein products must meet the requirements.

<sup>5</sup> Yogurt must contain no more than 23 grams of total sugars per 6 ounces.

<sup>6</sup> Pasteurized full-strength juice may only be used to meet the vegetable or fruit requirement at one meal, including snack, per day.

<sup>7</sup> A vegetable may be used to meet the entire fruit requirement. When two vegetables are served at lunch or supper, two different kinds of vegetables must be used.

<sup>8</sup> At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count toward meeting the grains requirement.

<sup>9</sup> Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams of sucrose and other sugars per 100 grams of dry cereal).

## ADULT MEAL PATTERN

<b>Snack</b> (Select two of the five components for a reimbursable meal)	
Food Components and Food Items <sup>1</sup>	Minimum Quantities
<b>Fluid Milk<sup>2</sup></b>	8 fluid ounces
<b>Meat/Meat Alternates</b>	
Lean meat, poultry, or fish	1 ounce
Tofu, soy product, or alternate protein product <sup>3</sup>	1 ounce
Cheese	1 ounce
Large egg	1/2
Cooked dry beans or peas	1/4 cup
Peanut butter or soy nut butter or another nut or seed butter	2 Tbsp
Yogurt, plain or flavored, sweetened or unsweetened <sup>4</sup>	4 ounces or 1/2 cup
Peanuts, soy nuts, tree nuts, or seeds	1 ounce
<b>Vegetables<sup>5</sup></b>	1/2 cup
<b>Fruits<sup>5</sup></b>	1/2 cup
<b>Grains (oz eq)<sup>6,7</sup></b>	
Whole grain-rich or enriched bread	1 oz eq
Whole grain-rich or enriched bread product such as biscuit, roll, or muffin	1 oz eq
Whole grain-rich, enriched, or fortified cooked breakfast cereal <sup>8</sup> , cereal grain, and/or pasta	1/2 cup cooked
Whole grain-rich, enriched or fortified ready-to-eat breakfast cereal (dry, cold) <sup>7</sup>	
Flakes or rounds	1 cup
Puffed cereal	1 1/4 cups
Granola	1/4 cup

<sup>1</sup> Select two of the five components for a reimbursable snack. Only one of the two components may be a beverage.

<sup>2</sup> Must be unflavored lowfat (1 percent), unflavored fat-free (skim), flavored lowfat (1 percent), or flavored fat-free (skim). Six ounces (weight) or 3/4 cup (volume) of yogurt may be used to meet the equivalent of 8 ounces of fluid milk once per day when yogurt is not served as a meat alternate in the same meal.

<sup>4</sup> Yogurt must contain no more than 23 grams of total sugars per 6 ounces.

<sup>5</sup> Pasteurized full-strength juice may only be used to meet the vegetable or fruit requirement at one meal, including snack, per day.

<sup>6</sup> At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count toward meeting the grains requirement.

<sup>7</sup> Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams of sucrose and other sugars per 100 grams of dry cereal).

# CACFP GRAINS CHART

## Exhibit A—Grains for Child Nutrition Programs<sup>1,2</sup>

GROUP A	MINIMUM SERVING SIZE FOR GROUP A
<ul style="list-style-type: none"> <li>•Bread-type coating</li> <li>•Breadsticks (hard)</li> <li>•Chow mein noodles</li> <li>•Croutons</li> <li>•Pretzels (hard)</li> <li>•Savory crackers (saltines and snack crackers)</li> <li>•Stuffing (dry)</li> </ul> <p><b>NOTE: Weights apply to bread in stuffing.</b></p>	<p>1 oz eq = 22 gm or 0.8 oz            3/4 oz eq = 17 gm or 0.6 oz            1/2 oz eq = 11 gm or 0.4 oz            1/4 oz eq = 6 gm or 0.2 oz</p>
GROUP B	MINIMUM SERVING SIZE FOR GROUP B
<ul style="list-style-type: none"> <li>•Bagels</li> <li>•Batter-type coating</li> <li>•Biscuits</li> <li>•Breads (white, wheat, whole-wheat, French, Italian)</li> <li>•Buns (hamburger and hot dog)</li> <li>•Egg roll skins</li> <li>•English muffins</li> <li>•Pita bread (white, wheat, whole-wheat)</li> <li>•Pizza crust</li> <li>•Pretzels (soft)</li> <li>•Rolls (white, wheat, whole-wheat, potato)</li> <li>•Sweet crackers (graham crackers—all shapes, animal crackers)</li> <li>•Tortillas (wheat or corn)</li> <li>•Tortilla chips (wheat or corn)</li> <li>•Taco shells</li> </ul>	<p>1 oz eq = 28 gm or 1.0 oz            3/4 oz eq = 21 gm or 0.75 oz            1/2 oz eq = 14 gm or 0.5 oz            1/4 oz eq = 7 gm or 0.25 oz</p>
GROUP C	MINIMUM SERVING SIZE FOR GROUP C
<ul style="list-style-type: none"> <li>•Cookies<sup>3</sup> (plain, includes vanilla wafers)</li> <li>•Cornbread</li> <li>•Corn muffins</li> <li>•Croissants</li> <li>•Pancakes</li> <li>•Pie crust (dessert pies<sup>3</sup>, fruit turnovers<sup>3</sup>, cobbler<sup>3</sup>, and meat/meat alternate pies)</li> <li>•Waffles</li> </ul>	<p>1 oz eq = 34 gm or 1.2 oz            3/4 oz eq = 26 gm or 0.9 oz            1/2 oz eq = 17 gm or 0.6 oz            1/4 oz eq = 9 gm or 0.3 oz</p>

<sup>1</sup> Under the CACFP, the following foods are whole grain or enriched or made with enriched or whole-grain meal and/or flour, bran, and/or germ. For meals and snacks served to children and adults, at least one serving of grains per day in the CACFP must be whole grain-rich starting October 1, 2017. Under the NSLP and SBP, the following food quantities from Group A-G must contain at least 16 grams of whole grain or can be made with 8 grams of whole grain and 8 grams of enriched meal and/or enriched flour to be considered whole grain-rich.

<sup>2</sup> Some of the following foods or their accompaniments may contain more sugar, salt, and/or fat than others. This should be a consideration when deciding how often to serve them.

<sup>3</sup> Considered a grain-based dessert and cannot count toward the grain component at any meal served under the CACFP beginning October 1, 2017, as specified in §226.20(a)(4).

<sup>4</sup> Refer to program regulations for the appropriate serving size for supplements served to children and adult participants. Breakfast cereals are traditionally served as a breakfast menu item but may be served in meals other than breakfast.

<sup>5</sup> Under the CACFP, cereals may be whole grain, enriched, or fortified, and must contain no more than 6 grams of sugar per dry ounce.



# CACFP GRAINS CHART

## Exhibit A continued

GROUP D	MINIMUM SERVING SIZE FOR GROUP D
<ul style="list-style-type: none"> <li>•Doughnuts<sup>3</sup> (cake and yeast-raised, unfrosted)</li> <li>•Granola bars<sup>3</sup> (plain, cereal bars, breakfast bars)</li> <li>•Muffins (all except corn)</li> <li>•Sweet roll<sup>3</sup> (unfrosted)</li> <li>•Toaster pastry<sup>3</sup> (unfrosted)</li> </ul>	1 oz eq = 55 gm or 2.0 oz 3/4 oz eq = 42 gm or 1.5 oz 1/2 oz eq = 28 gm or 1.0 oz 1/4 oz eq = 14 gm or 0.5 oz
GROUP E	MINIMUM SERVING SIZE FOR GROUP E
<ul style="list-style-type: none"> <li>•Cookies<sup>3</sup> (with nuts, raisins, chocolate pieces, fruit purees)</li> <li>•Doughnuts<sup>3</sup> (cake and yeast-raised, frosted and glazed)</li> <li>•French toast</li> <li>•Granola bars<sup>3</sup> (with nuts, chocolate pieces, or dried fruit)</li> <li>•Sweet rolls<sup>3</sup> (frosted)</li> <li>•Toaster pastry<sup>3</sup> (frosted)</li> </ul>	1 oz eq = 69 gm or 2.4 oz 3/4 oz eq = 52 gm or 1.8 oz 1/2 oz eq = 35 gm or 1.2 oz 1/4 oz eq = 18 gm or 0.6 oz
GROUP F	MINIMUM SERVING SIZE FOR GROUP F
<ul style="list-style-type: none"> <li>•Cake<sup>3</sup> (plain, unfrosted)</li> <li>•Coffee cake<sup>3</sup></li> </ul>	1 oz eq = 82 gm or 2.9 oz 3/4 oz eq = 62 gm or 2.2 oz 1/2 oz eq = 41 gm or 1.5 oz 1/4 oz eq = 21 gm or 0.7 oz
GROUP G	MINIMUM SERVING SIZE FOR GROUP G
<ul style="list-style-type: none"> <li>•Brownies<sup>3</sup> (plain)</li> <li>•Cake<sup>3</sup> (all varieties, frosted)</li> </ul>	1 oz eq = 125 gm or 4.4 oz 3/4 oz eq = 94 gm or 3.3 oz 1/2 oz eq = 63 gm or 2.2 oz 1/4 oz eq = 32 gm or 1.1 oz
GROUP H	MINIMUM SERVING SIZE FOR GROUP H
<ul style="list-style-type: none"> <li>•Cereal grains (barley, quinoa, etc.)</li> <li>•Breakfast cereals<sup>4,5</sup> (cooked)</li> <li>•Bulgur or cracked wheat</li> <li>•Macaroni (all shapes)</li> <li>•Noodles (all varieties)</li> <li>•Pasta (all shapes)</li> <li>•Ravioli (noodle only)</li> <li>•Rice (enriched white or brown)</li> </ul>	1 oz eq = 1/2 cup cooked (or 28 gm dry)
GROUP I	MINIMUM SERVING SIZE FOR GROUP I
<ul style="list-style-type: none"> <li>•Ready-to-eat breakfast cereal<sup>4,5</sup> (cold, dry)</li> </ul>	1 oz eq = 1 cup or 1.0 oz for flakes or rounds 1 oz eq = 1.25 cup or 1.0 oz for puffed cereal 1 oz eq = 1/4 cup or 1.0 oz for granola

<sup>3</sup> Considered a grain-based dessert and cannot count toward the grain component at any meal served under the CACFP beginning October 1, 2017, as specified in §226.20(a)(4).

<sup>4</sup> Refer to program regulations for the appropriate serving size for supplements served to children and adult participants. Breakfast cereals are traditionally served as a breakfast menu item but may be served in meals other than breakfast.

<sup>5</sup> Under the CACFP, cereals may be whole grain, enriched, or fortified, and must contain no more than 6 grams of sugar per dry ounce.

# Offer Versus Serve in the Child and Adult Care Food Program



If your site serves meals to at-risk afterschool or adult participants in the Child and Adult Care Food Program (CACFP), you may use a type of meal service called Offer Versus Serve (OVS). OVS allows children and adults to decline some of the food offered in a reimbursable breakfast, lunch, or supper. OVS may not be used at snacks or in other CACFP settings. OVS can help reduce food waste and give children and adults more choices.

## Understanding OVS: Know the Terms

- **Food component**—the name of a **group** of foods in a reimbursable meal. **Food components** include milk, vegetables, fruits, grains, and meat and meat alternates. At breakfast only, vegetables and fruits are one combined component. This means you can serve vegetables, fruits, or a combination of both to meet this requirement.
- **Food item**—foods that are part of a **food component**. For example, broccoli is a **food item** in the vegetables **food component**.

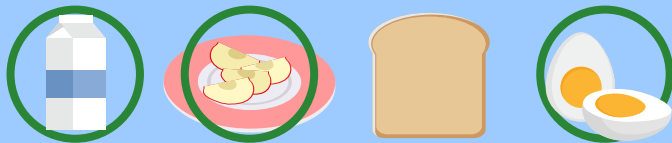
## How to Use OVS at Meals

### OVS at Breakfast

1. Offer these 3 **food components** at breakfast:
  - Milk
  - Vegetables and/or Fruits
  - Grains
2. Offer at least 4 different **food items** at breakfast, at least 1 from each **food component** above. The 4th food item can come from the vegetables or fruits, grains, or meat/meat alternates component.
3. Ask the child or adult to **choose at least 3** different **food items**.

### OVS at Lunch and Supper

1. Offer these 5 **food components** at lunch and supper:
  - Milk\*
  - Vegetables
  - Fruits
  - Grains
  - Meat and meat alternates
2. Offer at least one **food item** from each component.
3. Ask the child or adult to choose **food items** from **3 or more food components**.



**Note:** The 4th food item can be selected as well.



**Note:** The child or adult can select food from all 5 components. Foods from **at least 3 components** are needed for a reimbursable meal.

**\*For Adult Participants Only:** Milk is optional at supper. If milk is not offered, the adult still needs to select food items from 3 different food components to have a reimbursable meal.

## Tips About Food Items

- All food items offered at breakfast, lunch, and supper must be different food items. For example, while apple slices and applesauce are two forms of apples, they are considered the same food item. Likewise, oranges and orange juice are the same food item.
- The full minimum serving size of a food item must be taken in order for it to count towards a reimbursable meal.



## Try It Out!

Use the information on this worksheet to answer the questions below.

1. Your adult day care center uses OVS at breakfast and offers low-fat (1%) milk, apple slices, oatmeal, and bananas. Karen is a participant who chooses milk, oatmeal, and apple slices, and took the full minimum serving size of each item. Is Karen's breakfast reimbursable? Why or why not?

2. Your at-risk afterschool site uses OVS at supper and offers non-fat (skim) milk, roasted turkey, roasted broccoli, steamed carrots, fruit salad, and whole-wheat rolls. David is a participant who chooses the turkey, broccoli, and carrots, and took the full minimum serving size of each item. Is this supper reimbursable? Why or why not?

3. Your at-risk afterschool site uses OVS at supper, and offers tuna salad, sliced tomatoes, peaches, pita bread, and low-fat (1%) milk. Your participant Anna would like all the food offered, but only wants half of the minimum serving size of each food. Would this supper be reimbursable? Why or why not?

**Answer Key:**

1. Yes, Karen's breakfast is reimbursable. For OVS at breakfast, the operator is required to offer at least 4 food items that include: 1 item from the milk component (low-fat (1%) milk), 1 item from the vegetable/fruits component (apple slices), 1 item from the grains component (oatmeal), and 1 additional food item from grains, meat/meat alternates, or vegetables/fruit component (bananas). To make a reimbursable breakfast, a participant must choose 3 or more of the items offered, and must take at least the full minimum serving size of each item. Because Karen chose 3 of the items offered (milk, oatmeal, and apple slices), and took the full minimum serving size of each item, this breakfast is reimbursable.

2. No, David's supper is not reimbursable. For OVS at supper for at-risk afterschool sites, the operator is required to offer at least 1 food item from the following 5 components: milk (non-fat (skim) milk), meat and meat alternates (roasted turkey), vegetables (roasted broccoli and steamed carrots), fruits (fruit salad), and grains (whole-wheat rolls). In all cases, the participant must choose food items from at least 3 different components in order to make a reimbursable supper, and must take at least the minimum serving size of each. Because the roasted broccoli and the steamed carrots are both in the vegetables component, David's supper only has 2 components (meat/meat alternates and vegetables) and needs food from another component to make up a reimbursable supper. He should add the minimum serving size of fruit salad, whole-wheat rolls, and/or milk, to make a reimbursable supper.

3. If Anna takes only half of the minimum serving size of each food offered, her supper would not be reimbursable. The full minimum serving size of items from at least three different components must be taken in order to make up a reimbursable supper.