

## PRE-OPERATIONAL VISIT / SITE SELECTION WORKSHEET

Sponsor Name \_\_\_\_\_ IRN # \_\_\_\_\_

Site Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

Site telephone number: \_\_\_\_\_

Person to contact for use of site: \_\_\_\_\_

Type of site (check appropriate type):

_____	Recreation Center	_____	Park
_____	School	_____	Residential Camp
_____	Church	_____	Settlement House
_____	Playground	_____	Other (name)
_____	Community Center		

Estimated number of needy children in area: \_\_\_\_\_

Estimated number of personnel needed to adequately control the food service: \_\_\_\_\_

Is another site needed in this area? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are the present facilities adequate for an organized meal service? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If "no", comments \_\_\_\_\_

For estimated number of children does the site have:	Yes	No
Shelter form inclement weather	_____	_____
Adequate cooking facilities (if applicable)	_____	_____
Adequate storage for prepared or delivered food	_____	_____
Storage space for records at site	_____	_____
Site appears meet adequate safety and sanitation standards	_____	_____
Access to a telephone	_____	_____

What type of organized activities are possible or planned at this site? \_\_\_\_\_

Improvements or corrective actions needed before site operates: \_\_\_\_\_

I certify that the above site has been visited and has the capability to serve meals for the number of children anticipated to attend.

Sponsor/Monitor Signature: \_\_\_\_\_ Date \_\_\_\_\_

Site Representative Signature: \_\_\_\_\_ Date \_\_\_\_\_

Revised 02/14