

**Food and Nutrition Service (FNS)**  
**HealthierUS School Challenge**  
*Recognizing Excellence in Nutrition and Physical Activity*

**Application Cover Sheet**

**Application for:** \_\_\_\_\_ **Bronze Award** \_\_\_\_\_ **Silver Award**

**PRINT OR TYPE ALL INFORMATION**

School Name	
School District	
School Address	
Grades in School	
Contact Person's Name and Title	
Contact Person's Phone Number & Email	
Date Submitted to State Agency	

**FOR OFFICE USE ONLY**

**State**

Approved by State Child Nutrition Director: \_\_\_\_\_  
Signature Date

**Regional Office**

FNS Region \_\_\_\_\_ Reviewed by: \_\_\_\_\_

Approved by Child Nutrition Director: \_\_\_\_\_  
Signature Date

**FNS Headquarters (HQ)**

Application received HQ \_\_\_\_\_ Reviewed by \_\_\_\_\_  
 Decision/Date \_\_\_\_\_ Award period \_\_\_\_\_

School Name \_\_\_\_\_

**HealthierUS School Challenge**  
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## Application Check-off Sheet

**Please include the following information in your Application:**

\_\_\_\_\_ Cover Sheet (pg 1)

\_\_\_\_\_ Check-off Sheet (pg 2)

\_\_\_\_\_ Application Form (pg 3)

\_\_\_\_\_ The monthly menus for reimbursable school lunches served in your school.  
*(Menus must reflect four consecutive weeks, where each week has at least three days and the total number of days over the 4-week menu is 16 days or more. For example: 3 days week 1; 3 days week 2; 5 days week 3; 5 days week 4 = 16 days)*

\_\_\_\_\_ 4-week Lunch Menu Worksheets (pg 4-7)

\_\_\_\_\_ Production records for the 4-week Lunch Menus

\_\_\_\_\_ Documentation including recipes, food product ingredient statements and/or Nutrition Facts Labels to verify that the criteria have been met for the following:

- Whole-grain products
- A la carte and vended items sold in the foodservice area(s) during meal periods

\_\_\_\_\_ Nutrition Education Worksheet (pg 8)

\_\_\_\_\_ Physical Education/Activity Worksheet (pg 9)

\_\_\_\_\_ Competitive Foods Worksheet (pg 10)

\_\_\_\_\_ School Policies and Practices Checklist (pg 11)

\_\_\_\_\_ Review Committee Verification Form (pg 12)

\_\_\_\_\_ Copy of Your Wellness Policy and Team Nutrition Verification

**Place all materials in a 3-ring binder.**

**Multiple schools applying in one District** that use the same menu and the same foods, may submit one 4-week lunch menu, one set of menu worksheets and one set of recipes, food product ingredient statements, and/or Nutrition Facts Labels. However, each school must have their own cover sheet, application form, review committee verification form, food production records, competitive foods worksheet that includes a la carte information and vended items (unless they are the same throughout the district), nutrition education and physical education/activity worksheets, as well as school policies and practices checklist and wellness policy (unless it is a district policy).

School Name \_\_\_\_\_

12-04-08  
 Bronze/Silver Award Application 2

**HealthierUS School Challenge**  
*Recognizing Excellence in Nutrition and Physical Activity*

**Application for Bronze or Silver Award**

<b>Criteria</b>	<b>Yes</b>	<b>No</b>
<b>1. Are you a Team Nutrition School?</b> (Include print out of Team Nutrition verification from Team Nutrition website: <a href="http://teammnutrition.usda.gov/schoolsdb/srchpage.asp">http://teammnutrition.usda.gov/schoolsdb/srchpage.asp</a> )		
<b>2. Have all of your corrective actions from the most recent School Meals Initiative (SMI) review been completed?</b>		
<b>3. Are all of lunches submitted reimbursable lunches?</b>		
<b>4. Do your reimbursable lunches meet or exceed the criteria in the worksheets?</b> (Include forms on pages 4-7 and documentation for menus served.)		
<b>5. Is nutrition education provided to students in multiple grades and does it meet or exceed the criteria in the worksheet?</b> (Include worksheet on page 8.)		
<b>6. Is the opportunity for physical education/activity provided to students that meets or exceeds the criteria in the worksheet?</b> (Include worksheet on page 9.)		
<b>7. What is your student Average Daily Participation (ADP) for reimbursable lunches? List ADP: _____ Month: _____</b> (Must be 62% of enrollment or higher for Bronze and 70% of enrollment or higher for Silver.)		
<b>8. Does your school serve/sell a la carte foods, extra milk or have foods or beverages available in vending machines in the school cafeteria and/or other designated school meal area during meal periods? If yes, do these foods and beverages meet the competitive foods criteria listed in the worksheet?</b> (Include worksheet on page 10, Nutrition Facts Labels and/or recipes.)		
<b>9. Does your school meet the School Policies and Practices criteria listed on page 11 of this application?</b> (Include worksheet on page 11.)		

The State Agency and FNS reserve the right to verify all information on the application and reject applications that are incomplete or otherwise fail to provide factual information.

**Lunch Menu Worksheet – Bronze or Silver Award**

School Name \_\_\_\_\_

Dates Week 1 Menu was served: \_\_\_\_\_

## Week 1

Menu Planning Approach Used: \_\_\_\_\_ Traditional \_\_\_\_\_ Enhanced \_\_\_\_\_ NSMP

LUNCH MENU CRITERIA	FOOD ITEM	PORTION SIZE	COMMENTS (OPTIONAL)
<b>Vegetables:</b> Offer a different vegetable every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same vegetable are considered the same, i.e. mashed potatoes and tater tots are both potatoes.</i>	M T W T F	M T W T F	
<b>Dark green or orange vegetables:</b> Offer dark green or orange vegetables on 3 or more days per week. (Of the 3, at least 2 must be different. All must be at least ¼ cup serving size)	1 2 3	1 2 3	
<b>Cooked dry beans or peas (legumes):</b> Offer at least once a week (at least ¼ cup serving size).	1	1	
<b>Fruits:</b> Offer a different fruit every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same fruit are considered the same, i.e. fresh apples and applesauce are both apples.</i>	M T W T F	M T W T F	
<b>Fresh fruit:</b> Offer fresh fruit at least 1 day a week (at least ¼ cup serving size).	1	1	
<b>Whole grain foods:</b> Offer whole grain food at least 3 days/week, and may not be the same one each day.	1 2 3	In oz or grams: 1 2 3	
Does your menu only offer low-fat (1% or less) and fat-free (skim) milk, flavored or unflavored, each day?			• Yes      • No
How many side items can a student take each day (excluding milk) for a reimbursable meal?			
Do students have the opportunity to select each of the required food items of the HealthierUS School Challenge (HUSSC)?			• Yes      • No
Does this week's menu meet the HUSSC menu criteria?			• Yes      • No

### Lunch Menu Worksheet – Bronze or Silver Award

School Name \_\_\_\_\_

Dates Week 2 Menu was served: \_\_\_\_\_

## Week 2

Menu Planning Approach Used: \_\_\_\_\_ Traditional      \_\_\_\_\_ Enhanced      \_\_\_\_\_ NSMP

LUNCH MENU CRITERIA	FOOD ITEM	PORTION SIZE	COMMENTS (OPTIONAL)
<b>Vegetables:</b> Offer a different vegetable every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same vegetable are considered the same, i.e. mashed potatoes and tater tots are both potatoes.</i>	M T W T F	M T W T F	
<b>Dark green or orange vegetables:</b> Offer dark green or orange vegetables on 3 or more days per week. (Of the 3, at least 2 must be different. All must be at least ¼ cup serving size)	1 2 3	1 2 3	
<b>Cooked dry beans or peas (legumes):</b> Offer at least once a week (at least ¼ cup serving size).	1	1	
<b>Fruits:</b> Offer a different fruit every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same fruit are considered the same, i.e. fresh apples and applesauce are both apples.</i>	M T W T F	M T W T F	
<b>Fresh fruit:</b> Offer fresh fruit at least 1 day a week (at least ¼ cup serving size).	1	1	
<b>Whole grain foods:</b> Offer whole grain food at least 3 days/week, and may not be the same one each day.	1 2 3	In oz or grams: 1 2 3	
Does your menu only offer low-fat (1% or less) and fat-free (skim) milk, flavored or unflavored, each day?			• Yes      • No
How many side items can a student take each day (excluding milk) for a reimbursable meal?			
Do students have the opportunity to select each of the required food items of the HealthierUS School Challenge (HUSSC)?			• Yes      • No
Does this week's menu meet the HUSSC menu criteria?			• Yes      • No

School Name \_\_\_\_\_

## Lunch Menu Worksheet – Bronze or Silver Award

**Dates Week 3 Menu was served:** \_\_\_\_\_

<b>Week 3</b>			
Menu Planning Approach Used:   ___ Traditional       ___ Enhanced       ___ NSMP			
<b>LUNCH MENU CRITERIA</b>	<b>FOOD ITEM</b>	<b>PORTION SIZE</b>	<b>COMMENTS (OPTIONAL)</b>
<b>Vegetables:</b> Offer a different vegetable every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same vegetable are considered the same, i.e. mashed potatoes and tater tots are both potatoes.</i>	M T W T F	M T W T F	
<b>Dark green or orange vegetables:</b> Offer dark green or orange vegetables on 3 or more days per week. (Of the 3, at least 2 must be different. All must be at least ¼ cup serving size)	1 2 3	1 2 3	
<b>Cooked dry beans or peas (legumes):</b> Offer at least once a week (at least ¼ cup serving size).	1	1	
<b>Fruits:</b> Offer a different fruit every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same fruit are considered the same, i.e. fresh apples and applesauce are both apples.</i>	M T W T F	M T W T F	
<b>Fresh fruit:</b> Offer fresh fruit at least 1 day a week (at least ¼ cup serving size).	1	1	
<b>Whole grain foods:</b> Offer whole grain food at least 3 days/week, and may not be the same one each day.	1 2 3	In oz or grams: 1 2 3	
Does your menu only offer low-fat (1% or less) and fat-free (skim) milk, flavored or unflavored, each day?		• Yes	• No
How many side items can a student take each day (excluding milk) for a reimbursable meal?			
Do students have the opportunity to select each of the required food items of the HealthierUS School Challenge (HUSSC)?		• Yes	• No
Does this week's menu meet the HUSSC menu criteria?		• Yes	• No

School Name \_\_\_\_\_

## Lunch Menu Worksheet – Bronze or Silver Award

**Dates Week 4 Menu was served:** \_\_\_\_\_

<b>Week 4</b>			
Menu Planning Approach Used: _____ Traditional      _____ Enhanced      _____ NSMP			
<b>LUNCH MENU CRITERIA</b>	<b>FOOD ITEM</b>	<b>PORTION SIZE</b>	<b>COMMENTS (OPTIONAL)</b>
<b>Vegetables:</b> Offer a different vegetable every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same vegetable are considered the same, i.e. mashed potatoes and tater tots are both potatoes.</i>	M T W T F	M T W T F	
<b>Dark green or orange vegetables:</b> Offer dark green or orange vegetables on 3 or more days per week. (Of the 3, at least 2 must be different. All must be at least ¼ cup serving size)	1 2 3	1 2 3	
<b>Cooked dry beans or peas (legumes):</b> Offer at least once a week (at least ¼ cup serving size).	1	1	
<b>Fruits:</b> Offer a different fruit every day of the week (at least ¼ cup serving size). <i>Note that various preparations of the same fruit are considered the same, i.e. fresh apples and applesauce are both apples.</i>	M T W T F	M T W T F	
<b>Fresh fruit:</b> Offer fresh fruit at least 1 day a week (at least ¼ cup serving size).	1	1	
<b>Whole grain foods:</b> Offer whole grain food at least 3 days/week, and may not be the same one each day.	1 2 3	In oz or grams: 1 2 3	
Does your menu only offer low-fat (1% or less) and fat-free (skim) milk, flavored or unflavored, each day?			• Yes      • No
How many side items can a student take each day (excluding milk) for a reimbursable meal?			
Do students have the opportunity to select each of the required food items of the HealthierUS School Challenge (HUSSC)?			• Yes      • No
Does this week's menu meet the HUSSC menu criteria?			• Yes      • No

School Name \_\_\_\_\_

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**Nutrition Education Worksheet**

Grades in which nutrition education is provided (circle all that apply) K 1 2 3 4 5 6 7 8

Is nutrition education provided in at least half of the grades? \_\_\_\_\_ Yes \_\_\_\_\_ No

Briefly describe how nutrition education is provided to students in multiple grades and:

- Is part of a structured and systematic unit of instruction such as MyPyramid lessons from Team Nutrition (explain below)
- Involves multiple channels of communication, including the classroom, cafeteria, and home/parents (explain below)

Grades	Description of Nutrition Education Efforts



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**Physical Education/Activity Worksheet**

Grades in which physical education classes are provided (circle all that apply): K 1 2 3 4 5 6 7 8

**Does your school provide physical education classes to *all full-day* students throughout the school year?**     Yes     No

**Do the physical education classes cover a minimum average of 45 minutes per week?**  
 Yes     No

Grades	List the average number of minutes/week that physical education is provided throughout the school year for each grade circled above.	Describe any additional daily physical activity opportunities provided to students (such as recess). Indicate time allotted for any routine activities.

School Name \_\_\_\_\_

## HealthierUS School Challenge

### Recognizing Excellence in Nutrition and Physical Activity

### Competitive Foods Worksheet

Does your school sell/serve a la carte foods or beverages during meal periods in the foodservice area in competition with reimbursable meals? (Including vending machines or a school store.)

\_\_\_ Yes \_\_\_ No

If YES, attach a list of foods and beverages sold as competitive foods, complete the following table and provide food product ingredient labels, Nutrition Facts Labels and/or recipes for each item.

**Exempt from competitive foods criteria: Second servings of entrees on the reimbursable lunch menu for the day.**

Criteria		Meets	Doesn't Meet
<b>Total Fat</b>	Calories from total fat must be at or below 35% per serving. Excludes nuts, seeds, nut butters, and reduced fat cheese.		
<b>Trans Fat</b>	"Trans fat free" or less than .5 g <i>trans</i> fat per serving.		
<b>Saturated Fat</b>	Calories from saturated fat must be below 10% per serving. Excludes reduced fat cheese.		
<b>Sugar</b>	Total sugar per serving must be at or below 35% by weight (includes naturally occurring and added sugars). Excludes fruits, vegetables and milk.		
<b>Sodium</b>	<ul style="list-style-type: none"> <li>• Must be at or below 480 mg per side dish/non-entrée serving</li> <li>• Must be at or below 600 mg per main dish/entrée serving</li> </ul>		
<b>Portion Size/Calories</b>	Must not exceed the serving size of the food served in the school lunch program. For other items, the package or container must not exceed 200 calories.		
<b>Milk</b>	Must be low-fat (1% or less) and/or fat-free (skim), flavored or unflavored, milk meeting State and local standards for pasteurized milk and/or USDA approved alternative dairy beverages.		
<b>Milk serving size</b>	Must be limited to maximum of 8 fluid ounces.		
<b>Other Approved Beverages</b>	<ul style="list-style-type: none"> <li>• 100% full strength fruit and vegetable juices with <i>no</i> sweeteners (<i>nutritive or non-nutritive</i>).</li> <li>• Water: non-flavored, no sweeteners (<i>nutritive or non-nutritive</i>), non-carbonated, non-caffeinated.</li> </ul>		
<b>Juice serving size</b>	Must be limited to maximum of 6 fluid ounces.		

School Name \_\_\_\_\_

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**School Policies and Practices Checklist**

<b>School Policies and Practices</b>		<b>Yes</b>	<b>No</b>
<b>Fundraising</b>	1. Are primarily non-food items sold through school fundraising activities?  2. Do food items that are sold during the school day meet the guidelines for competitive foods?		
<b>Physical Activity</b>	Does your school demonstrate a commitment to neither deny nor require physical activity as a means of punishment? <i>(For example, students who misbehave are not denied recess.)</i>		
<b>Nutrition</b>	Does your school demonstrate a commitment to prohibit the use of food as a reward? <i>(For example, teachers do not offer candy as a reward to students for good behavior, or for the completion of an assignment.)</i>		
<b>Wellness Policy</b>	Does your school have an approved Wellness Policy included in this application?		

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**Review Committee Verification Form**

Please read the following statement and sign below if you agree:

*We have reviewed this application, and we agree that our school meals are healthy and appealing to our students. We attest to the accuracy of the information provided, including the criteria for school policies and practices specified on page 11 of this application. We agree to maintain the nutrition excellence and physical education/activity standards and procedures indicated in this application for the duration of our certification as Bronze or Silver awardees. Furthermore, we agree to cooperate with USDA and other organizations, upon request, to publicize our efforts.*

Foodservice Manager's Name	Signature	Date
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Team Nutrition Leader's Name	Signature	Date
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School Food Authority's Name	Signature	Date
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Representative of the School's Parent Organization	Signature	Date
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Physical Education/Health Teacher Name	Signature	Date
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Principal's Name	Signature	Date
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Thank you for applying for the **HealthierUS School Challenge**.  
 For more information, visit the Team Nutrition Website: [www.teamnutrition.usda.gov](http://www.teamnutrition.usda.gov)

**Please submit your completed application and documentation to your State Child Nutrition Agency.**

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Services, Office of Research and Analysis, Room 1014, Alexandria, VA 22302 ATTN: PRA (0584-0524). Do not return the completed form to this address.

School Name \_\_\_\_\_