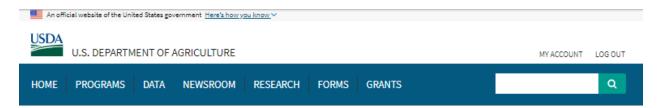
Appendix_11_Online FNS 892_Team Nutrition CACFP Organization



Create CACFP

OMB Control Number: 0584-XXXX Expiration Date: XX/XX/XXXX

OMB BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 15 minutes 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.

Organization Information
ORGANIZATION NAME
ADDRESS
CITY
STATE
ZIP CODE
PHONE NUMBER
DUNS NUMBER
ORGANIZATION WEBPAGE URL (http://www.example.com)
Organization Types (Select the type of Organization)
☐ Sponsoring Organization
☐ Independent At-Risk Afterschool Care Center
☐ Independent Child Care Center
☐ Public or Private Nonprofit Emergency Shelter
☐ Independent Adult Day Care Center

Number of Sites Under the Organization

AT-RISK AFTERSCHOOL CARE CENTERS DAY CARE HOMES

H.IVI	ULT DAY CARE CENTERS ERGENCY SHELTERS
	ILD CARE CENTERS
Age	Groups (Select the age groups served by your sites)
	O-11 Months
	1-2 Years
	3-5 Years
	5-12 Year
	13-18 Years
	Over 18 Years (Adults)
	ganization Point of Contacts
CAC	CFP DIRECTOR NAME
CAC	CFP DIRECTOR PHONE NUMBER
CAC	CFP DIRECTOR EMAIL
NU'	TRITION EDUCATION/TRAINING CONTACT NAME
NII I'	TRITION EDUCATION/TRAINING CONTACT NUMBER
NO.	TRITION EDUCATION/TRAINING CONTACT NUMBER
NU	TRITION EDUCATION/TRAINING CONTACT EMAIL
	utrition and Wellness Activities your site(s) are
wc sta	orking On (If you have multiple sites, check if the attement applies to at least one of your sites.)
wc sta Frui	orking On (If you have multiple sites, check if the attement applies to at least one of your sites.) t and/or vegetable garden
Sta Frui	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A
Sta Frui	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes
WC Sta Frui O N O N	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No
Sta Frui O N O N Brea	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No
WC Sta Frui O N O N	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can
Sta Frui O N O N Brea site	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can
Sta Frui O N O N Brea site	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can N/A Yes
State Frui O M O M Breasite O M O M	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child car N/A Yes
Frui O N O N Brea site O N O N Do/N year	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can N/A Yes No Does your site(s) offer at least 90 minutes of active play in an 8-hour period for children and older?
Frui	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) It and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can N/A Yes No Does your site(s) offer at least 90 minutes of active play in an 8-hour period for children and older? N/A
Frui O N O N Brea site O N Do/I year O N	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) It and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can N/A Yes No Does your site(s) offer at least 90 minutes of active play in an 8-hour period for children and older? N/A Yes
Frui Sta Frui Sta Frui Sta Sta Sta Sta Sta Sta Sta St	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can N/A Yes No Does your site(s) offer at least 90 minutes of active play in an 8-hour period for children and older? N/A Yes No
Frui Sta Frui Sta Frui Sta	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can N/A Yes No Does your site(s) offer at least 90 minutes of active play in an 8-hour period for children and older? N/A Yes No er supervised tummy time every day for infants in short periods when they are awake
Frui Sta Frui Sta Frui Sta	orking On (If you have multiple sites, check if the atement applies to at least one of your sites.) t and/or vegetable garden N/A Yes No astfeeding space to encourage mothers to breastfeed or pump breastmilk at your child can N/A Yes No Does your site(s) offer at least 90 minutes of active play in an 8-hour period for children and older? N/A Yes No Yes No Yes No Yes No Yer N/A Yes No Yes Yes No Yes No Yes Yes Yes No Yes
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Allow 60-90 minutes in an 8-hour period of physical activity to children 1-3 years old N/A Yes No
Offer opportunities for physical activity throughout the day for adults $\cite{N/A}$
O Yes O No
Limit screen time to no more than 1 hour per day of high-quality media viewed with an adult for children over the age of 2 years N/A
O Yes
 No Have the participant's meals and/or snacks catered by an outside food vendor N/A
O Yes
O No
Use family style meal service at meals and/or snacks N/A
O Yes
○ No
Develop or create original training materials for the CACFP, such as handouts, worksheets, presentations, etc.
O N/A
C Yes
O No
Develop or create original recipes or menus for the CACFP
O N/A
O Yes
O No
Close Organization
Close Organization
SAVE AS
<u>S</u> ave