



219 North Main Street, Suite 402  
Barre, VT 05641 (p) 802-479-1030 | (f) 802-479-1300

# SFSP Pre-Operational Visit Form

Sponsor Name: \_\_\_\_\_

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

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

Site Phone Number: \_\_\_\_\_ Person to contact for use of site: \_\_\_\_\_

Type of Site:

- |  |   |
|--|---|
| <input type="checkbox"/> Apartment Complex                           | <input type="checkbox"/> Recreation Center              |
| <input type="checkbox"/> Church                                      | <input type="checkbox"/> Residential Camp               |
| <input type="checkbox"/> Housing and Urban Development (HUD) Housing | <input type="checkbox"/> Rural Development (RD) Housing |
| <input type="checkbox"/> Library                                     | <input type="checkbox"/> School                         |
| <input type="checkbox"/> Park  | <input type="checkbox"/> Playground                     |
| <input type="checkbox"/> Other                                       |   |

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

Planned Site Type:  Open  Closed-Enrolled  Non-residential Camp  Residential Camp

Necessary eligibility information:  Yes  No

Estimated number of personnel needed for meal service: \_\_\_\_\_

Are the present facilities adequate for a congregate meal service?  Yes  No

Does the site have:

- Shelter for inclement weather?  Yes  No
- Adequate cooking facilities (if necessary)?  Yes  No
- Adequate storage, including refrigeration for prepared or delivered food?  Yes  No
- Access to a telephone?  Yes  No

Is this site for profit?  Yes  No

What types of organized activities are possible and/or planned at this site? \_\_\_\_\_

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



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For returning problem sites, list any deficiencies noted in the previous summer: \_\_\_\_\_

Monitor Name: \_\_\_\_\_

Monitor Signature: \_\_\_\_\_ Date: \_\_\_\_\_