|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CACFP Menu for Children 1-18 years of age**  **\*Three or Less Meal Services** | | | | | | |  | |  |
| **Center name** |  | | | |  | **Month and Year** | |  | |
|  |  | | | |  |  | |  | |
|  | |  |  |  | | |  | |  |
| **Meal Patterns** | | **Monday**  **Date\_\_\_\_\_\_\_\_\_\_** | **Tuesday**  **Date\_\_\_\_\_\_\_\_\_\_** | **Wednesday**  **Date\_\_\_\_\_\_\_\_\_\_** | | | **Thursday**  **Date\_\_\_\_\_\_\_\_\_\_** | | **Friday**  **Date\_\_\_\_\_\_\_\_\_\_** |
| **Breakfast**  • Grains, OR   * Meat/Meat alternate (no more than 3 times per week)   • Fruit or Vegetable  • Milk | |  |  |  | | |  | |  |
| **Lunch**   * Meat/Meat alternate   • Vegetable  • Fruit  • Grains  • Milk | |  |  |  | | |  | |  |
| **Snack**  *Select two of the following:*   * Meat/Meat alternate   • Vegetable  • Fruit  • Grains  • Milk | |  |  |  | | |  | |  |

\*Type of milk served: 1 year olds \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2 & older\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Record the specific names of cereals, fruits, and vegetables served

\*Note whole grain items with WG or WW and whole grain-rich items with WGR