



FDCH Sponsor Staff Training Checklist

Staff must receive training every year on the 7 required topics, as applicable to their CACFP assigned tasks. New staff must be trained before starting their responsibilities and annually thereafter.

INSTRUCTIONS: COMPLETE SEPARATE RECORDS FOR EACH TRAINING EVENT

Complete this for each group session/staff meeting or for an individual staff completing a self-study.

- For staff meetings/group sessions, have attendees sign on back
- Check topics covered and resources used
- If other resources are used, attach copies

TRAINING EVENT INFORMATION

Training Date: _____	Start Time: _____	End Time: _____
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Trainer(s): _____

Training Type: <input type="checkbox"/> Staff meeting <i>Have attendees sign-in on next page</i>	<input type="checkbox"/> Group session	<input type="checkbox"/> Self-study <i>List name and job title in the space below</i>
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Self-Study:	Staff Name _____	Job Title _____
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REQUIRED TOPICS	RESOURCES	
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<input type="checkbox"/> Meal Pattern (GML)	<input type="checkbox"/> 1-12+ year olds <input type="checkbox"/> Meal Service	<input type="checkbox"/> Infants <input type="checkbox"/> Special Dietary Needs <input type="checkbox"/> Other _____
<input type="checkbox"/> Meal Counts	<input type="checkbox"/> GM B - Criteria for Meal Reimb. <input type="checkbox"/> GM D - Monitoring	<input type="checkbox"/> Other _____
<input type="checkbox"/> Claims Submission (Provider Claims)	<input type="checkbox"/> GM B - Criteria for Meal Reimb. <input type="checkbox"/> DPI-Sponsor Agreement (GML)	<input type="checkbox"/> GM D - Monitoring <input type="checkbox"/> Other _____
<input type="checkbox"/> Claims Submission (Sponsor Claims)	<input type="checkbox"/> GM N-Claims Submission <input type="checkbox"/> GM F: Financial Management	<input type="checkbox"/> Other _____
<input type="checkbox"/> Recordkeeping Requirements	<input type="checkbox"/> GM K-Recordkeeping	<input type="checkbox"/> Other _____
<input type="checkbox"/> Review Requirements	<input type="checkbox"/> GM D - Monitoring <input type="checkbox"/> DPI-Sponsor Agreement (GML)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Reimbursement System (Provider Payments)	<input type="checkbox"/> GM F- Financial Management <input type="checkbox"/> GM A-Provider Eligibility <input type="checkbox"/> GM B - Criteria for Meal Reimb.	<input type="checkbox"/> GM J-Tiering <input type="checkbox"/> Other _____
<input type="checkbox"/> Civil Rights (GM H) – All CACFP Staff must complete annually ➤ Must use Civil Rights Training for Sponsor Staff PowerPoint or Handout	<input type="checkbox"/> PowerPoint <input type="checkbox"/> Handout	

OPTIONAL TOPICS COVERED (Attach resources used)

<input type="checkbox"/> Health and Sanitation	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

This form is optional; other documentation methods may be used if they clearly show the sponsor has provided training on the required topics to all CACFP staff annually.



Staff Meeting/Group Training Attendance Sign-In Sheet

Training Date: _____

Location: _____

Full Name	Job Title