

MENU FORM FOR CHILDREN OVER ONE

Provider _____

Month and Year _____

	Food:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:
B	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk
R	Fruit or Veg												
	Bread/Alt												
	Meat/Alt(optional)												
	Milk												
M	Fruit or Veg												
S	Bread/Alt												
	Meat/Alt												
	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk
L	Meat/Alt												
U	Vegetable												
N	Fruit or Veg												
C	Bread/Alt												
H	Add'l Food												
	Milk												
A	Fruit or Veg												
S	Bread/Alt												
	Meat/Alt												
S	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk
U	Meat/Alt												
P	Vegetable												
P	Fruit or Veg												
E	Bread/Alt												
R	Add'l Food												
	Milk												
	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk
R	Fruit or Veg												
	Bread/Alt												
	Meat/Alt(optional)												
	Milk												
M	Fruit or Veg												
S	Bread/Alt												
	Meat/Alt												
	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk
L	Meat/Alt												
U	Vegetable												
N	Fruit or Veg												
C	Bread/Alt												
H	Add'l Food												
	Milk												
A	Fruit or Veg												
S	Bread/Alt												
	Meat/Alt												
S	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk	Milk
U	Meat/Alt												
P	Vegetable												
P	Fruit or Veg												
E	Bread/Alt												
R	Add'l Food												

MILK REQUIREMENTS

One Year Old - Unflavored Whole Milk Only

Ages 2 -5 - Unflavored 1% or Fat Free Milk Only

Ages 6 - 13 - Unflavored or Flavored 1% or Fat Free Milk Only