

CACFP TRAINING AGENDA

(Complete agenda for each training and have attendees sign in)

Name of Center: _____

Training Date: _____

Start and End time: _____

Location: _____

Presenter(s): _____

Agenda Topics (indicate specific topics covered):

| | |
|---|---|
| <i>Note: CACFP regulations require initial and yearly training for key staff in key topics listed below:</i> | |
| <p>Required Key Topics</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meal Pattern and serving sizes <input type="checkbox"/> Point of Service meal counts <input type="checkbox"/> Record Keeping requirements <input type="checkbox"/> Reimbursement system <input type="checkbox"/> Claim submission <input type="checkbox"/> Review Procedures <p><i>In addition to the key topics, Institutions are required to train <u>all staff</u> once a year on the following subject:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Civil Rights | <p>Suggested Optional Topics</p> <ul style="list-style-type: none"> <input type="checkbox"/> Income Eligibility Forms <input type="checkbox"/> Confidentiality <input type="checkbox"/> Menu Planning <input type="checkbox"/> Monitoring (requirements) <input type="checkbox"/> Health and sanitation <input type="checkbox"/> Meal Service environment <input type="checkbox"/> Unannounced reviews <input type="checkbox"/> Meal production records <input type="checkbox"/> Accurate accounting of meal counts |

Attach Copies of Handouts and Training Materials Used.

Attendance Sign In:

| Name | Position |
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