

## Field Trip Food Service Documentation Child Management Associates

Complete the form and return to CMA for approval prior to the date of the field trip. Allow 5 to 7 days to complete the process. To be eligible for reimbursement the field trip must be approved prior to the meal being served. Keep a copy of the form with your claim to document a point of service meal count/attendance will has been taken.

1. Provider Name:		2. Provider #	
3. Destination/City/State:	4. Date of Trip	5. Departure Time:	
		6. Return Time:	
Field Trip Meal Service Information			
7. Meal Type (s): B A L P S	8. Where will the meals be served?		
9. Describe the method used to ensure transported foods will be held at the proper temperatures:			

10. MENU SERVED ON FIELD TRIP			
Menu			
Milk:		Meat:	
Fruit/Vegetable:		Bread:	
Fruit/Vegetable:		Other:	
10. FIELD TRIP ATTENDANCE (To be completed the day of the field trip)			
Name of Participant	Name of Participant	Name of Participant	
1.	6.	11.	
2.	7.	12.	
3.	8.	13.	
4.	9.	14.	
5.	10.	15.	

11. I certify that to the best of my knowledge the information reported on this form is true and correct. I certify that all meals will be prepared, delivered and served in accordance with state and local health department standards.

\_\_\_\_\_  
SIGNATURE OF PROVIDER

\_\_\_\_\_  
DATE OF SIGNATURE

\_\_\_\_\_  
Signature of CMA Official

\_\_\_\_\_  
Date of Approval